

TO: Dr. Thomas L. Richey  
FROM: Sabrina Jewell  
DATE: September 21, 2011  
RE: Application & Agreement-KDE  
Child Nutrition Program

Please approve the submission of the annual Application and Agreement with the Kentucky Department of Education requesting permission to administer the Child Nutrition Program for the 2011-2-12 school year.

An application and agreement will be submitted to KDE pending Board approval.

Thank you for your consideration.

Sabrina Jewell

Child Nutrition Director

# NSLP Renewal Checklist for SY 11-12 (Public School District)

**To: Kentucky Department of Education – School and Community Nutrition**

**Attention: (Fax – 502-564-5519)**

☐ Terina Edington     ☐ Steve Justice     ☐ Colby Wagoner     ☐ Jenny Fuller     ☐ Cindy McIntosh  
☐ Angela Voyles     ☒ Jennifer Langfels     ☐ Mike Dodridge     ☐ Diane Preston     ☐ Valerie Crouch

Sponsor Name: Henderson County BOE Schools Sponsor Number: 051-251-999-0A

Sponsor Contact: Sabrina Jewell

Telephone: (270) 831-5015 Email: sabrina.jewell@henderson.kyschools.us

**Public School District Required Documents for NSLP Renewal (Application and Agreement) for SY 2011-2012:**

Place a checkmark next to item sent or an "NA" if the item is non-applicable.	Document Description	SCN USE ONLY – Date of NHS approval
<input checked="" type="checkbox"/>	Statement of Authority for NSLP (required)	
<input checked="" type="checkbox"/>	Board Certification Form for NSLP (required)	
<input checked="" type="checkbox"/>	Civil Rights Questionnaire (required)	
<input checked="" type="checkbox"/>	(place a checkmark next to applicable attachments) <input checked="" type="checkbox"/> Free and Reduced Price Policy Statement (required) <input checked="" type="checkbox"/> Attachment A – Public (Media) Release (if applicable) <input checked="" type="checkbox"/> Attachment B - Letter to Household (if applicable) <input checked="" type="checkbox"/> Attachment C - Application for Free and Reduced-Price Meals (if applicable) <input checked="" type="checkbox"/> Attachment D - Notice to Households of Approval/Denial of Benefits (if applicable) <input checked="" type="checkbox"/> Attachment E - Direct Certification Notice (if applicable) <input type="checkbox"/> Attachment F - Disclosure Agreement and Parent Consent form (required) on hold per email from Sue Bartenfield <input checked="" type="checkbox"/> Attachment G - Notification of Selection for Verification of Eligibility (if applicable) <input checked="" type="checkbox"/> Attachment H - Letter of Verification Results and Adverse Action (if applicable) <input checked="" type="checkbox"/> Attachment I - Meal Counting and Collection Procedures (required) <input checked="" type="checkbox"/> Attachment J - Adult/Student Charge Policy (if applicable) <input checked="" type="checkbox"/> Attachment K - Nondiscrimination Policy (required) <input checked="" type="checkbox"/> Attachment L - Procurement Policy (required) <input type="checkbox"/> Attachment M - Provision 2 Amendment (if applicable) N/A <input checked="" type="checkbox"/> Attachment N – Special Dietary Needs Policy and Procedures (required) <input checked="" type="checkbox"/> Attachment O – PLE Worksheet (Required)	
<input checked="" type="checkbox"/>	Production Record with requirement identification – Applicable only if you <u>do not</u> plan to use the State Prototype Production Record	
<input checked="" type="checkbox"/>	ASSP Certification for sites participating in the ASSP	
<input checked="" type="checkbox"/>	Wellness Policy (if applicable)	

☒ I certify that the documents submitted are currently in use for the 2010-2011 SY.

\_\_\_\_\_  
Child Nutrition Director

\_\_\_\_\_  
Date

## STATEMENT OF AUTHORITY

Agreement Number: 0512519990A

Sponsor Name: Henderson County BOE Schools

Address: 1805 Second St

City/State/Zip: Henderson, KY 42420

Phone Number: 270-831-5015

I, the undersigned, state that the providers for which we are herewith submitting an application for the National School Lunch Program (NSLP) are an integral part of the above named organization.

All funds relating to the National School Lunch Program shall be subject to the control of the duly constituted governing body of the organization, and that all funds received shall be used exclusively for the purpose of operating the National School Lunch Program.

The following named individual(s) is/are duly authorized to sign official documents in connection with the sponsor's operation of the NSLP:

  
Signature of Authorized Representative

Child Nutrition Director  
Title

\_\_\_\_\_  
Signature of Authorized Representative

Asst. Superintendent-Finance  
Title

The undersigned certifies that he/she has the authority to represent the sponsoring organization/independent center named above. It is also understood that the information on this form is being given in connection with the receipt of Federal funds and that all of the provisions of the Agreement apply.

\_\_\_\_\_  
Signature, Chairman of the Board and/or Owner

\_\_\_\_\_  
Date

**KENTUCKY DEPARTMENT OF EDUCATION  
SCHOOL AND COMMUNITY NUTRITION  
NATIONAL SCHOOL LUNCH PROGRAM and SUMMER FOOD SERVICE PROGRAM**

**BOARD MEMBER CERTIFICATION STATEMENT**

1. We certify that the following are the board members for Henderson County Board of Education.

Name of the Board Member(s) and/or Owners	Date(s) of Birth	Home Mailing Address	Home Phone Number	Date that Term Expires ( <i>Must Be Listed</i> )
Jon L. Sights	4-16-69	5 Colonial Court, Henderson, KY 42420	270-869-8856	12-2012
Ben Johnston	12-22-60	7732 Baskett Cemetery Rd, Baskett, KY 42402	270-827-8533	12-2014
Greg Hunsaker	8-17-61	8779 HWY 1078 South, Henderson, KY 42420	270-827-8832	12-2014
Lisa Baird	4-26-58	5580 Eblen Rd, Henderson, KY 42420	270-860-3748	12-2012
Mike Waller	10-3-55	1319 Woodland Dr, Henderson, KY 42420	270-827-9050	12-2014

2. Identify Chairman of the Board, Owner, Manager or President of a Limited Liability Corporation, or Executive Director Ben Johnston.
3. Identify those in a supervisory or management position within the organization that work with the NSLP or SFSP: \_\_\_\_\_.
4. Identify board members that are related \_\_\_\_\_.
5. **We certify** that we are in compliance with all applicable state rules and regulations regarding governing board of corporations.
6. **We certify** that we have never been a principal in an organization participating in a publicly funded program that has been ruled ineligible as a result of violating that program's requirements.
7. **We certify** that we have never been convicted of a business-related offense.
8. **We certify** that no organization's NSLP or SFSP employee has ever been convicted of a criminal offense.
9. **We certify** that none of the organization's NSLP or SFSP employees or board members has ever been associated with any organization terminated for failure to correct serious deficiencies, notices of serious deficiencies, notices of serious deficiency as prepared by a State Agency, and/or are included on USDA's National Disqualified List of Institutions.
10. **We understand** that the submission of false information to the State Agency is grounds for termination or denial from the NSLP or SFSP as described in 7 CFR 210 or 7 CFR 225.
11. **We understand** that any deliberate misrepresentation of NSLP or SFSP records will subject us to prosecution under applicable State and Federal Criminal statutes.
12. **We certify** that the information provided in this application is true and correct to the best of our knowledge.

\_\_\_\_\_  
Signature of Board Chairman

Date \_\_\_\_\_



**POLICY STATEMENT**  
**FOR FREE AND REDUCED PRICE MEALS, AFTER SCHOOL SNACKS, AND/OR FREE MILK**

The   Henderson County BOE   has agreed to participate in the:  
(Name of Local Education Agency)

- ☒ National School Lunch Program (NSLP) and/or
- ☒ School Breakfast Program (SBP) and/or
- ☐ Special Milk Program (SMP) "split-session" kindergarten or
- ☐ Special Milk Program (only schools **not** participating in the School Lunch or Breakfast Programs are eligible to participate in the Special Milk Program).
- ☒ After School Snack Program

and accepts responsibility for providing either:

- ☒ Free and reduced price meals and/or
- ☐ Free milk to eligible children in "split session" kindergarten or
- ☐ Free milk to eligible children in "milk only" schools or
- ☒ Free or reduced price after school snacks

The Local Education Agency (LEA) assures the Kentucky Department of Education that the LEA will uniformly implement the following policy to determine children's eligibility for free and reduced price meals and free milk for kindergarten and free and reduced price snacks in all schools that participate in the NSLP and/or SBP and/or After School Snack Program. The LEA also determines children's eligibility for free milk in schools with pricing programs participating in the SMP only. In fulfilling its responsibilities, the LEA agrees to all conditions outlined in this "Policy".

In fulfilling its responsibilities, the LEA agrees:

- A. To serve meals and/or after school snacks (or milk in those schools which offer the free milk option under the SMP) free to children from families who provide a Supplemental Nutrition Assistance Program (SNAP) (formerly known as Food Stamps) case number or a Kentucky Temporary Assistance Program (KTAP) case number on the application, or whose income is at or below the free scale of the Income Eligibility Guidelines.
- B. To serve meals and/or after school snacks at a reduced price to children from households whose income is at or below the reduced price scale of the Income Eligibility Guidelines.

**POLICY STATEMENT**  
**FOR FREE AND REDUCED PRICE MEALS, AFTER SCHOOL SNACKS, AND/OR FREE MILK**

C. That there will be no physical segregation of, nor any other discrimination against, any child against, any child because of his/her inability to pay the full price of the meal or milk. The names of the children eligible to receive free or reduced meals and/or after school snacks or free milk shall not be published, posted, or announced in any manner, and there shall be no overt identification of any such children by use of special tokens, tickets or any other means. Further assistance is given that children eligible for free or reduced price meals and/or after school snacks or free milk shall not be required to:

1. Work for their meals or milk
2. Use a separate lunchroom or milk service area
3. Go through a separate serving line
4. Enter the lunchroom through a separate entrance
5. Eat meals or drink milk at a different time
6. Eat a meal different from the one sold to children paying the full price or drink milk different from that sold to children paying the full price

D. To set reduced price charges for lunch, breakfast or after school snacks at or below the maximum reduced price allowed by regulations and below the full price of the lunch or breakfast. **(The reduced price is as follows: 40 cents per lunch; 30 cents per breakfast; and 15 cents for after school snacks).**

E. That, in the operation of school nutrition programs, no child shall be discriminated against because of race, color, national origin, sex, age or disability.

F. To **verify** in accordance with program regulations and maintain records as follows:

1. A summary of the verification efforts;
2. The total number of applications on file **on October 1**; and
3. The percentage or number of applications verified.

*Compliance with these requirements will be monitored by the State agency as part of its administrative review and verifications efforts.*

G. To establish and use a fair hearing procedure under which:

1. A family can appeal a decision made by the LEA with respect to the family's free milk or free and reduced price meal application; and
2. The LEA can challenge the continued eligibility of any child for free or reduced price meals and/or after school snack or free milk.

**POLICY STATEMENT**  
**FOR FREE AND REDUCED PRICE MEALS, AFTER SCHOOL SNACKS, AND/OR FREE MILK**

During the appeal and hearing, the child who was determined to be eligible based on the original application submitted will continue to receive free or reduced price meals or free milk. Prior to initiating the hearing procedure, the school official, the parent/guardian may request a conference to provide an opportunity for the parent/guardian and school officials to discuss the situation, present information, obtain an explanation of data submitted in the application and the decisions rendered. Such a conference shall not in any way prejudice or diminish the right to a fair hearing.

The hearing procedure shall provide the following for both the family and the LEA:

1. A publicly announced, simple method for making an oral or written request for a hearing.
2. An opportunity to be assisted or represented by an attorney or other person.
3. An opportunity to examine, prior to and during the hearing, the documents and records presented to support the decision under appeal.
4. Reasonable promptness and convenience in scheduling a hearing, and adequate notice as to its time and place.
5. An opportunity to present oral or documentary evidence and arguments supporting a position without undue interference.
6. An opportunity to question or refute any testimony or other evidence and to confront and cross-examine any adverse witnesses.
7. That the hearing be conducted and the decision be made by an official who did not participate in the decision under appeal or any previous conference.
8. That the decision of the hearing official be based on the oral and documentary evidence presented at the hearing and entered into the hearing record.
9. That the parties concerned and any designated representative thereof be notified in writing of the decision.
10. That for each hearing a written record be prepared, including the decision under appeal, any documentary evidence and a summary of any oral testimony presented at the hearing, the decision of the hearing official and the reasons therefore, and a copy of the notification to the parties concerned of the hearing.
11. That such written records shall be retained for a period of 3 years after the date of the final Claim for Reimbursement for the fiscal year to which they pertain, except that if audit findings have not been resolved, the records shall be retained beyond the 3 year period as long as required for resolution of the issues raised by the audit. These records must be made available for examination by the parties concerned or their designees at any reasonable time and place during the period.

**POLICY STATEMENT**  
**FOR FREE AND REDUCED PRICE MEALS, AFTER SCHOOL SNACKS, AND/OR FREE MILK**

H. To designate a determining official(s):

\_\_Sabrina Jewell, Child Nutrition Director or Janie Suddoth, Clerk\_\_\_\_  
(Name) (Title)

1805 2<sup>nd</sup> St \_\_\_\_\_ Henderson, KY 42420 \_\_\_\_\_  
(Address) (City, State, Zip)

to review applications and make determinations of eligibility. Such official(s) will use the criteria outlined in this policy to determine which individual children are eligible for free and reduced price meals or free milk.

- I. To develop and distribute to each child's parents or guardian, a letter as provided in sample on-line materials. In addition, an application form for free and reduced price meals or free milk shall be distributed with the parent letter at or about the beginning of each school year or whenever there is a change in eligibility criteria. The letter to parents with the free and reduced price meal application attachment shall have **only the income eligibility guidelines for reduced price meals** with an explanation that households with incomes at or below the reduced price guidelines may be eligible for either free or reduced price meals. **The letter to parents with the free milk application form shall list the income eligibility guidelines for free milk.**

Interested parents or guardians are responsible for filling out the application and returning it to the school for review. Such applications and documentation of determinations made will be maintained for a period of 3 years following the end of the school year to which they pertain.

Applications may be filed at any time during the year. Parents or guardians enrolling a child in a school for the first time shall be supplied with appropriate meal or milk application materials regardless of the time of year the child is registered. If a child transfers from one school to another under the jurisdiction of the same LEA, his/her eligibility for free or reduced price meals or free milk will be transferred to and honored by the receiving school.

Parents or guardians will be promptly notified of the acceptance or denial of their application. Children will be served meals or milk immediately upon the establishment of their eligibility.

## POLICY STATEMENT

It is recognized that in certain cases foster children are also eligible for these benefits. If a household has a child living with them who is a legal ward of the state of Kentucky, the child is considered a family of one, and monthly income from the State should be listed.

When an application is rejected, parents or guardians will be provided written notification, which shall include:

1. The reason for the denial of benefits, e.g., income in excess of allowable limits or incomplete application;
2. Notification of the right to appeal;
3. Instructions of how to appeal; and
4. A statement reminding parents that they may reapply for free and reduced price benefits or free milk at any time during the school year.

The reason for ineligibility shall be properly documented and retained on file at the LEA level.

The designated hearing official is:

\_\_\_\_\_  
(Name)

\_\_\_\_\_  
(Title)

1805 2<sup>nd</sup> St Henderson, KY 42420  
(Address) (City, State, Zip)

**Note:** The hearing official must be someone **not** involved in the original eligibility determination or verification process. It is suggested that he/she hold a position at a higher administrative level than that of the determining official.

- J. To **submit a public/press release** containing both the free and reduced price eligibility guidelines and all other information outlined in the parent letter, to the local news media, local unemployment offices and major employers contemplating or experiencing large layoffs.
- K. To establish a procedure to collect money from children who pay for their meals, after school snacks and milk and to account for the number of free, reduced price and full price meals and/or after school snacks served or the number of half-pints of free and full price milk served. This collection procedure will be used so that no other child in the school will

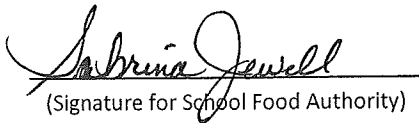
**POLICY STATEMENT**  
**FOR FREE AND REDUCED PRICE MEALS, AFTER SCHOOL SNACKS, AND/OR FREE MILK**

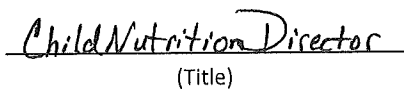
consciously be made aware by such procedure of the identity of the children receiving free or reduced price meals or free milk.

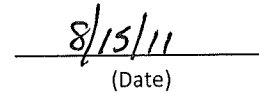
L. Agrees to submit to the Kentucky Department of Education any alterations, etc., before implementation. Such changed will be effective only upon approval. All changes in eligibility criteria must be publicly announced in the same manner used at the beginning of the school year.

M. The following attachments are adopted with and considered part of this policy:

Attachment A	Media Release
Attachment B	Letter to Household
Attachment C	Application for Free and Reduced-Price Meals
Attachment D	Notice to Households of Approval/Denial of Benefits
Attachment E	Direct Certification Notice
Attachment F	Disclosure Agreement and Parent Consent form
Attachment G	Notification of Selection for Verification of Eligibility
Attachment H	Letter of Verification Results and Adverse Action
Attachment I	Meal Counting and Collection Procedures
Attachment J	Adult/Student Charge Policy
Attachment K	Nondiscrimination Policy
Attachment L	Procurement Policy
Attachment M	Provision 2 Amendment (remove if not applicable)

  
(Signature for School Food Authority)

  
(Title)

  
(Date)

\_\_\_\_\_  
(Child Nutrition Program Consultant)  
Kentucky Department of Education

\_\_\_\_\_  
(Title)

\_\_\_\_\_  
(Date)

**CIVIL RIGHTS COMPLIANCE QUESTIONNAIRE**  
**KENTUCKY DEPARTMENT OF EDUCATION**  
**SCHOOL AND COMMUNITY NUTRITION**

<b>Sponsor Name:</b>	<b>Henderson County BOE</b>
<b>Sponsor Number:</b>	<b>0512519990A</b>
<b>Child Nutrition Director:</b>	<b>Sabrina Jewell</b>

**I. GENERAL INFORMATION:**

The Kentucky Department of Education, hereinafter referred to as the Department, has the responsibility of assuring that all agencies receiving federal funds through the department are in compliance with Title VI of the Civil Rights Act of 1964. The information requested below will be used to determine your eligibility for participation in the Child Nutrition Programs.

**II. COMPLIANCE CHECKLIST:**

	<b>Yes</b>	<b>No</b>	<b>NA</b>
1. Does sponsor have a written policy of nondiscrimination covering race, color, sex, age, national origin, or disability?	X		
2. Does the written policy cover students/residents?	X		
3. Does the written policy cover employees?	X		
4. Is the policy of nondiscrimination published in a manner which is likely to bring the policy to the attention of minority groups?	X		
5. Is a copy of the sponsor's current nondiscrimination policy for students/residents/employees on file with Nutrition and Health Services?	X		
6. Do recruitment brochures and advertisements encourage participation of minorities?	X		
7. Is the sponsor capable of taking reasonable steps to assure meaningful access to the information and services provided for participants and potential participants with Limited English Proficiency (LEP)?	X		
8. Are applicants for employment and admission treated in a nondiscriminatory manner during interviews?	X		
9. Is financial aid (scholarships, tuition waivers, room and board) available without regard to race, color, sex, age, national origin, or disability?			X
10. When meals are served, are services provided in a nondiscriminatory manner?	X		

Briefly describe any additional activities conducted by your agency to encourage minority participation in your programs:

Media release

Send household applications at beginning of school year

Announcements in schools that applications are available in the cafeteria and at the Principal's office

Give names of other federal agencies which provide assistance to the organization (applicant):

US Department of Education

Have any of these federal agencies found the organization (applicant) to be in noncompliance? If so, which agencies?

No



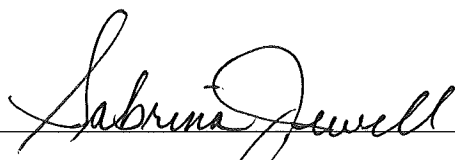
### III. DATA COLLECTION

Complete the chart below using the most recent information available. **KY School Districts in which this information is collected via Infinite Campus do not need to complete this section.**

	Number of employees in food service.	Number of students/ participants.
<b>Ethnicity:</b>		
<i>Hispanic or Latino</i> – A Person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.		
<i>Not Hispanic or Latino</i>		
<b>TOTAL</b>		
<b>Race:</b>		
<i>American Indian or Alaskan Native</i> – A person having origins in any of the original peoples of North or South America (including Central America), and who maintains tribal affiliation or community attachment.		
<i>Asian</i> – A person having origins in any of the original Peoples of the far East, Southeast Asia, or the Indian subcontinent, including, for example Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.		
<i>Black or African American</i> – A person having origins in Any of the black racial groups of Africa.		
<i>Native Hawaiian or Other Pacific Islander</i> – A person Having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.		
<i>White</i> – A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.		
<b>TOTAL</b>		

\*Race and Ethnicity are TWO separate categories; It is possible that the total number for Race may be larger than the total number for Ethnicity as respondents have the option of selecting more than one race.

I certify that the information contained herein is true and correct to the best of my knowledge and that the school(s) or institution(s) do(es) not discriminate on the basis of race, color, sex, age, national origin, or disability.

  
 \_\_\_\_\_  
 Child Nutrition Director

9-19-11

\_\_\_\_\_  
 Date

## **Jewell, Sabrina - CSS, School Food Service Director I**

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**From:** Redding, Ellen - CSS, Communication Coordinator  
**Sent:** Tuesday, August 09, 2011 7:54 AM  
**To:** Brad Hughes; Brad Schneider; Brandon Bartlett TV 14; Coursey, Jeff - HCH, School Administrative Manager; Evans, Shawna - HCH, YSC Coordinator III; Fox 7; Gleaner; Henderson Co Board Members; Henderson Co BOE CAMPUS All Staff; Henderson Co Curriculum Specialists; Henderson Co District Guidance Counselors; Henderson Co District Principals and Assistants; Henderson Co District School Secretaries; Henderson Co Publications; Jordan Vandenberg News 25; Kathy Moore; News 25; TV 14; Victoria Grabner; WBKR Radio; WEVV; WIKY ; WKDQ; WKDQ; WNIN; WNIN Radio; WSON; WSTO WIKY - Radio  
**Subject:** HCS National School Lunch Program Information  
**Attachments:** KY Public ReleaseRev-2011.pdf

Henderson, KY  
August 9, 2011

Press release attached

Ellen Redding  
Communications Coordinator  
1805 Second St.  
Henderson, KY 42420  
270-831-8728  
[ellen.redding@henderson.kyschools.us](mailto:ellen.redding@henderson.kyschools.us)

# Henderson County Schools

Announces its policy for Free and Reduced Price Meals for students under the

## **NATIONAL SCHOOL LUNCH AND BREAKFAST PROGRAMS.**

Any interested person may review a copy of the policy by contacting **Sabrina Jewell, 1805 Second St, Henderson, KY, 270-831-5015.**

Household size and income criteria will be used to determine eligibility. Children from families whose income is at or below the levels shown may be eligible for Free or Reduced Price Meals. An application cannot be approved unless it contains complete eligibility information. Once approved, meal benefits are good for an entire year. You need not notify the organization of changes in income and household size.

Application forms are being sent to all homes with a letter to parents or guardians. To apply for Free or Reduced Price Meals, households must complete the application and return it to the school. Additional copies are available at the principal's office in each school. The information provided on the application will be used for the purpose of determining eligibility and may be verified at any time during the school year. Applications may be submitted at any time during the year.

Households that receive SNAP or KTAP are required to list on the application only the child's name, SNAP / KTAP case number, and signature of adult household member.

Foster children will receive benefits based on information submitted on the household application or information received from an appropriate agency.

Household with children who are considered migrants, homeless, or runaway should contact the district liaison, **Midge Stribling at 270-831-5115.**

For the purpose of determining household size, deployed military members are considered a part of the household. Families should include the names of the deployed service members on their application. Report only that portion of the deployed service member's income made available to them or on their behalf to the family. Additionally, a housing allowance that is part of the Military Housing Privatization Initiative is not to be included as income.

All other households must provide the following information listed on the application:

- Total household income listed by gross amount received, type of income (e.g., wages, child support, etc.) and how often the income is received by each household member;
- Names of all household members;
- Signature of an adult household member certifying the information provided is correct; and
- The last four digits of the social security number of the adult signing the application or the word "NONE" for this household member if he or she does not have a social security number.

If a household member becomes unemployed or if the household size changes, the school should be contacted. Such changes may make the student eligible for reduced price or free meals.

Under the provisions of the Free and Reduced Price meal policy, **Sabrina Jewell, 270-831-5015**, will review applications and determine eligibility. If a parent or guardian is dissatisfied with the ruling of the official, he or she may wish to discuss the decision with the determining official on an informal basis. If the parent wishes to make a formal appeal, he or she may make a request either orally or in writing to **Dr. Thomas Richey, 1805 Second Street, Henderson, KY 42420, 270-831-5000.**

In accordance with the Sponsor's disclosure agreement, the information on the Free and Reduced Price Meal application may be used by the school system in determining eligibility for other educational programs.

**INCOME ELIGIBILITY GUIDELINES  
FOR FREE AND REDUCED PRICE MEALS**

**Effective from July 1, 2011, to June 30, 2012**

HOUSEHOLD SIZE	REDUCED PRICE MEALS - 185%					FREE MEALS - 130%				
	ANNUAL	MONTHLY	TWICE PER MONTH	EVERY TWO WEEKS	WEEKLY	ANNUAL	MONTHLY	TWICE PER MONTH	EVERY TWO WEEKS	WEEKLY
1.....	20,147	1,679	840	775	388	14,157	1,180	590	545	27
2.....	27,214	2,268	1,134	1,047	524	19,123	1,594	797	736	36
3.....	34,281	2,857	1,429	1,319	660	24,089	2,008	1,004	927	46
4.....	41,348	3,446	1,723	1,591	796	29,055	2,422	1,211	1,118	55
5.....	48,415	4,035	2,018	1,863	932	34,021	2,836	1,418	1,309	65
6.....	55,482	4,624	2,312	2,134	1,067	38,987	3,249	1,625	1,500	75
7.....	62,549	5,213	2,607	2,406	1,203	43,953	3,663	1,832	1,691	84
8.....	69,616	5,802	2,901	2,678	1,339	48,919	4,077	2,039	1,882	94
For each additional family member, add	7,067	589	295	272	136	4,966	414	207	191	9

**To determine annual income:**

- If you receive the income every week, multiply the total gross income by 52.
- If you receive the income every two weeks, multiply the total gross income by 26.
- If you receive the income twice a month, multiply the total gross income by 24.
- If you receive the income monthly, multiply the total gross income by 12.

**Remember:** The total income before taxes, social security, health benefits, union dues, or other deductions must be reported.

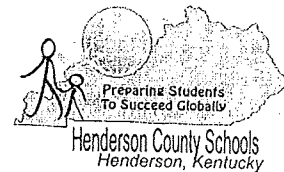
In accordance with Federal Law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, or disability. To file a complaint of discrimination, write USDA, Director, Office of Adjudication, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410 or call toll free (866) 632-9992 (Voice). Individuals who are hearing impaired or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339; or (800) 845-6136 (Spanish).  
USDA is an equal opportunity provider and employer.

# Henderson County Schools

1805 Second Street, Henderson, Kentucky 42420

(270) 831-5000 Fax: (270) 831-5009

<http://www.hendersonschools.net>



Dear Parent/Guardian:

Children need healthy meals to learn. **Henderson County Schools** offers healthy meals every school day. Breakfast costs **\$0.90**; lunch costs **\$1.55**. Your children may qualify for free meals or for reduced price meals. Reduced price is **\$0.30** for breakfast and **\$0.40** for lunch.

1. **DO I NEED TO FILL OUT AN APPLICATION FOR EACH CHILD?** No. Complete the application to apply for free or reduced price meals. *Use one Free and Reduced Price School Meals Application for all students in your household.* We cannot approve an application that is not complete, so be sure to fill out all required information. Return the completed application to: Henderson County Schools, Child Nutrition Office, 1805 Second Street, Henderson, KY
2. **WHO CAN GET FREE MEALS?** All children in households receiving benefits from **KY SNAP**, the Food Distribution Program on Indian Reservations or **KTAP**, can get free meals regardless of your income. Also, your children can get free meals if your household's gross income is within the free limits on the Federal Income Eligibility Guidelines.
3. **CAN FOSTER CHILDREN GET FREE MEALS?** **Yes, foster children that are under the legal responsibility of a foster care agency or court, are eligible for free meals. Any foster child in the household is eligible for free meals regardless of income.**
4. **CAN HOMELESS, RUNAWAY, AND MIGRANT CHILDREN GET FREE MEALS?** Yes, children who meet the definition of homeless, runaway, or migrant qualify for free meals. If you haven't been told your children will get free meals, please call or e-mail **Henderson County Schools, Midge Stribling, Homeless/Migrant Liaison Coordinator, (270) 831-5115**, to see if they qualify.
5. **WHO CAN GET REDUCED PRICE MEALS?** Your children can get low cost meals if your household income is within the reduced price limits on the Federal Eligibility Income Chart, shown on this application.
6. **SHOULD I FILL OUT AN APPLICATION IF I RECEIVED A LETTER THIS SCHOOL YEAR SAYING MY CHILDREN ARE APPROVED FOR FREE MEALS?** Please read the letter you got carefully and follow the instructions. Call the school at **(270) 831-5014 or 831-8752** and ask for **Janie** if you have questions.
7. **MY CHILD'S APPLICATION WAS APPROVED LAST YEAR. DO I NEED TO FILL OUT ANOTHER ONE?** Yes. Your child's application is only good for that school year and for the first few days of this school year. You must send in a new application unless the school told you that your child is eligible for the new school year.
8. **I GET WIC. CAN MY CHILD(REN) GET FREE MEALS?** Children in households participating in WIC may be eligible for free or reduced price meals. Please fill out an application.
9. **WILL THE INFORMATION I GIVE BE CHECKED?** Yes and we may also ask you to send written proof.
10. **IF I DON'T QUALIFY NOW, MAY I APPLY LATER?** Yes, you may apply at any time during the school year. For example, children with a parent or guardian who becomes unemployed may become eligible for free and reduced price meals if the household income drops below the income limit.

11. WHAT IF I DISAGREE WITH THE SCHOOL'S DECISION ABOUT MY APPLICATION? You should talk to school officials. You also may ask for a hearing by calling or writing to: **Sabrina Jewell, Child Nutrition Director, 1805 Second Street, Henderson, KY 42420, (270)831-5014, or [sabrina.jewell@henderson.kyschools.us](mailto:sabrina.jewell@henderson.kyschools.us)**
12. MAY I APPLY IF SOMEONE IN MY HOUSEHOLD IS NOT A U.S. CITIZEN? Yes. You or your child(ren) do not have to be U.S. citizens to qualify for free or reduced price meals.
13. WHO SHOULD I INCLUDE AS MEMBERS OF MY HOUSEHOLD? You must include all people living in your household, related or not (such as grandparents, other relatives, or friends) who share income and expenses. You must include yourself and all children living with you. If you live with other people who are economically independent (for example, people who you do not support, who do not share income with you or your children, and who pay a pro-rated share of expenses), do not include them.
14. WHAT IF MY INCOME IS NOT ALWAYS THE SAME? List the amount that you normally receive. For example, if you normally make \$1000 each month, but you missed some work last month and only made \$900, put down that you made \$1000 per month. If you normally get overtime, include it, but do not include it if you only work overtime sometimes. If you have lost a job or had your hours or wages reduced, use your current income.
15. WE ARE IN THE MILITARY. DO WE INCLUDE OUR HOUSING ALLOWANCE AS INCOME? If you get an off-base housing allowance, it must be included as income. However, if your housing is part of the Military Housing Privatization Initiative, do not include your housing allowance as income.
16. MY SPOUSE IS DEPLOYED TO A COMBAT ZONE. IS HER COMBAT PAY COUNTED AS INCOME? No, if the combat pay is received in addition to her basic pay because of her deployment and it wasn't received before she was deployed, combat pay is not counted as income. Contact your school for more information.
17. MY FAMILY NEEDS MORE HELP. ARE THERE OTHER PROGRAMS WE MIGHT APPLY FOR? To find out how to apply for KY SNAP or other assistance benefits, contact your local assistance office or call **Kentucky hotline number 1-800-372-2973.**

If you have other questions or need help, call (270) 831-5014 or (270) 831-8752.

*Si necesita ayuda, por favor llame al teléfono: (270) 831-5014 or (270) 831-8752.*

*Si vous voudriez d'aide, contactez nous au numero: (270) 832-5014 or (270) 831-8752.*

Sincerely,



Sabrina Jewell  
Child Nutrition Director  
Henderson County Schools  
1805 Second St  
Henderson, KY 42420

# INSTRUCTIONS FOR APPLYING

*A HOUSEHOLD MEMBER IS ANY CHILD OR ADULT LIVING WITH YOU.*

**IF YOUR HOUSEHOLD RECEIVES BENEFITS FROM KY SNAP, OR KY KTAP [OR THE FOOD DISTRIBUTION PROGRAM ON INDIAN RESERVATIONS (FDPIR)], FOLLOW THESE INSTRUCTIONS:**

**Part 1:** List all household members and the name of school for each child.

**Part 2:** List the case number for any household member (including adults) receiving KY SNAP or KY KTAP or [FDPIR] benefits.

**Part 3:** Skip this part.

**Part 4:** Skip this part.

**Part 5:** Sign the form. The last four digits of a Social Security Number are not necessary.

**Part 6:** Answer this question if you choose to.

**IF NO ONE IN YOUR HOUSEHOLD GETS KY SNAP OR KY KTAP BENEFITS AND IF ANY CHILD IN YOUR HOUSEHOLD IS HOMELESS, A MIGRANT OR RUNAWAY, FOLLOW THESE INSTRUCTIONS:**

**Part 1:** List all household members and the name of school for each child.

**Part 2:** Skip this part.

**Part 3:** If any child you are applying for is homeless, migrant, or a runaway check the appropriate box and call Henderson County Schools, Midge Stribling, Homeless/Migrant Liaison Coordinator at (270)831-5115..

**Part 4:** Complete only if a child in your household isn't eligible under Part 3. See instructions for All Other Households.

**Part 5:** Sign the form. The last four digits of a Social Security Number are not necessary if you didn't need to fill in Part 4.

**Part 6:** Answer this question if you choose to.

**IF YOU ARE APPLYING FOR A FOSTER CHILD, FOLLOW THESE INSTRUCTIONS:**

**If all children in the household are foster children:**

**Part 1:** List all foster children and the school name for each child. Check the box indicating the child is a foster child.

**Part 2:** Skip this part.

**Part 3:** Skip this part.

**Part 4:** Skip this part.

**Part 5:** Sign the form. The last four digits of a Social Security Number are not necessary.

**Part 6:** Answer this question if you choose to.

**If some of the children in the household are foster children:**

**Part 1:** List all household members and the name of school for each child. For any person, including children, with no income, you must check the "No Income" box. Check the box if the child is a foster child.

**Part 2:** If the household does not have a case number, skip this part.

**Part 3:** If any child you are applying for is homeless, migrant, or a runaway check the appropriate box and call Henderson County Schools, Midge Stribling, Homeless/Migrant Liaison Coordinator at (270)831-5115. If not, skip this part.

**Part 4:** Follow these instructions to report total household income from this month or last month.

- **Box 1—Name:** List all household members with income.
- **Box 2 —Gross Income and How Often It Was Received:** For each household member, list each type of income received for the month. You must tell us how often the money is received—weekly, every other week, twice a month or monthly. For earnings, be sure to list the **gross income**, not the take-home pay. Gross income is the amount earned *before* taxes and other deductions. You should be able to find it on your pay stub or your boss can tell you. For other income, list the amount each person got for the month from welfare, child support, alimony, pensions, retirement, Social Security, Supplemental Security Income (SSI), Veteran's benefits (VA benefits), and disability benefits. Under *All Other Income*, list Worker's Compensation, unemployment or strike benefits, regular contributions from people who do not live in your household, and any other income. Do not include income from SNAP, FDPIR, WIC, Federal education benefits and foster payments received by the family from the placing agency. For **ONLY** the self-employed, under *Earnings from Work*, report income after expenses. This is for your business, farm, or rental property. If you are in the Military Privatized Housing Initiative or get combat pay, do not include these allowances as income.

**Part 5:** Adult household member must sign the form and list the last four digits of their Social Security Number (or mark the box if s/he doesn't have one).

**Part 6:** Answer this question, if you choose.

# FREE AND REDUCED PRICE SCHOOL MEALS FAMILY APPLICATION 2011-2012

## **PART 1. ALL HOUSEHOLD MEMBERS: ALL PEOPLE LIVING IN YOUR HOUSEHOLD, RELATED OR NOT WHO SHARE INCOME AND EXPENSES**

Names of <u>all</u> household members			Name of school for each child/or indicate "NA" if child is not in school	Check if a foster child (legal responsibility of welfare agency or court) * If all children listed below are foster children, skip to Part 5 to sign this form.	Check if NO income
First	Middle Initial	Last			
1.				<input type="checkbox"/>	<input type="checkbox"/>
2.				<input type="checkbox"/>	<input type="checkbox"/>
3.				<input type="checkbox"/>	<input type="checkbox"/>
4.				<input type="checkbox"/>	<input type="checkbox"/>
5.				<input type="checkbox"/>	<input type="checkbox"/>
6.				<input type="checkbox"/>	<input type="checkbox"/>
7.				<input type="checkbox"/>	<input type="checkbox"/>
8.				<input type="checkbox"/>	<input type="checkbox"/>

**Part 2: BENEFITS: IF ANY MEMBER OF YOUR HOUSEHOLD RECEIVES KY SNAP, FDIPIR OR KY KTAP Cash Assistance, PROVIDE THE NAME AND CASE NUMBER FOR THE PERSON WHO RECEIVES BENEFITS AND SKIP TO PART 5. IF NO ONE RECEIVES THESE BENEFITS, SKIP TO PART 3.**

NAME: \_\_\_\_\_ CASE NUMBER: \_\_\_\_\_

**PART 3. IF ANY CHILD YOU ARE APPLYING FOR IS HOMELESS, MIGRANT, OR A RUNAWAY CHECK THE APPROPRIATE BOX AND CALL Midge Stribling, Home/Migrant Liaison Coordinator: 270-831-5115** HOMELESS ☐ MIGRANT ☐ RUNAWAY ☐

**PART 4. TOTAL HOUSEHOLD GROSS INCOME. You must tell us how much and how often.**

1. NAME (List only household members with income)	2. GROSS INCOME AND HOW OFTEN IT WAS RECEIVED FOR EXAMPLE: WEEKLY, EVERY OTHER WEEK, TWICE MONTHLY, MONTHLY			
	Earnings From Work before deductions	Welfare, child support, alimony	Pensions, retirement, Social Security, SSI, VA benefits	All Other Income
(Example) Jane Smith				
1.	\$ ____/____	\$ ____/____	\$ ____/____	\$ ____/____
2.	\$ ____/____	\$ ____/____	\$ ____/____	\$ ____/____
3.	\$ ____/____	\$ ____/____	\$ ____/____	\$ ____/____
4.	\$ ____/____	\$ ____/____	\$ ____/____	\$ ____/____
5.	\$ ____/____	\$ ____/____	\$ ____/____	\$ ____/____
6.	\$ ____/____	\$ ____/____	\$ ____/____	\$ ____/____

## **PART 5. SIGNATURE AND LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER (ADULT MUST SIGN)**

An adult household member must sign the application. If Part 4 is completed, the adult signing the form also must list the last four digits of his or her Social Security Number or mark the "I do not have a Social Security Number" box. (See Privacy Act Statement on the back of this page.)

*I certify (promise) that all information on this application is true and that all income is reported. I understand that the school will get Federal funds based on the information I give. I understand that school officials may verify (check) the information. I understand that if I purposely give false information, my children may lose meal benefits, and I may be prosecuted.*

Sign here: X \_\_\_\_\_ Print name: \_\_\_\_\_

Date: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Last four digits of Social Security Number: \*\*\*-\*\*-\_\_\_\_ ☐ I do not have a Social Security Number



# *Henderson County Schools*

1805 Second Street, Henderson, Kentucky 42420  
(270) 831-5000 Fax: (270) 831-5009  
<http://www.hendersonschools.net>

<<GUARDIAN>>  
<<ADDRESS1>>  
<<CITY/STATE/ZIP>>

<<DATE>>

Dear <<GUARDIAN>>,

**Welcome to our Breakfast and Lunch Program!**

<<STUDENTS>>

are eligible for : a free breakfast and lunch.

If you do not agree with the decision, you may discuss it with Janie Suddoth, 270-831-5015, or email [janie.suddoth@henderson.kyschools.us](mailto:janie.suddoth@henderson.kyschools.us)

If you wish to review the decision further, you have a right to a fair hearing. Please contact the following official for further information.

Dr. Thomas L. Richey  
1805 Second St  
Henderson, KY 42420  
270-831-5000

If I can be of help at any time or if you have any questions, please do not hesitate to call me at 270-831-5014.

Sincerely,

Sabrina Jewell  
Child Nutrition Director

Non-Discrimination Statement: This explains what to do if you believe you have been treated unfairly. ""In accordance with Federal Law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, or disability. To file a complaint of discrimination, write USDA, Director, Office of Adjudication, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410 or call toll free (866) 632-9992 (Voice). Individuals who are hearing impaired or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339; or (800) 845-6136 (Spanish). USDA is an equal opportunity provider and employer."

# *Henderson County Schools*

1805 Second Street, Henderson, Kentucky 42420  
(270) 831-5000 Fax: (270) 831-5009  
<http://www.hendersonschools.net>

<<GUARDIAN>>

<<ADDRESS>>

<<DATE>>

Dear <<GUARDIAN>>,

## **Welcome to our Breakfast and Lunch Program!**

<<STUDENTS>>

are eligible for : a reduced price breakfast (\$0.30 per day) and  
a reduced price lunch (\$0.40 per day)

Meals may be purchased on a weekly or daily basis in the cafeteria of your child's school.

If you do not agree with the decision, you may discuss it with Janie Suddoth, 270-831-5015, or email [janie.suddoth@henderson.kyschools.us](mailto:janie.suddoth@henderson.kyschools.us)

If you wish to review the decision further, you have a right to a fair hearing. Please contact the following official for further information.

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## *Henderson County Schools*

1805 Second Street, Henderson, Kentucky 42420

(270) 831-5000 Fax: (270) 831-5009

<http://www.hendersonschools.net>

<<GUARDIAN>>

<<ADDRESS>>

<<DATE>>

Dear <<GUARDIAN>>,

We have not been able to grant free or reduced meals to your child because:

- \_\_\_\_\_ 1. <<DENIED REASON>>
- \_\_\_\_\_ 2. Other \_\_\_\_\_

We know this letter will disappoint you. If you would like to discuss your qualifications or talk to someone about your needs, we do have a review process. Please call Janie Suddoth, 270-831-5015, or email [janie.suddoth@henderson.kyschools.us](mailto:janie.suddoth@henderson.kyschools.us).

Full price meals are as follows: breakfast \$0.90 and lunch \$1.55.

If you wish to review the decision further, you have a right to a fair hearing. Please contact the following official for further information.

Dr. Thomas L. Richey  
1805 Second St  
Henderson, KY 42420  
270-831-5000

You may reapply for free and reduced price benefits at anytime during the school year.

If I can be of help at any time or if you have any questions, please do not hesitate to call me at 270-831-5014.

Sincerely,

Sabrina Jewell  
Child Nutrition Director

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# Henderson County Schools

1805 Second Street, Henderson, Kentucky 42420

(270) 831-5000 Fax: (270) 831-5009

<http://www.hendersonschools.net>

<<GUARDIAN>>

<<ADDRESS>>

<<DATE>>

Dear <<GUARDIAN>>,

## Welcome to our Breakfast and Lunch Program!

We want to let you know that the child(ren) listed below will receive free lunches, breakfasts, and snacks at school because they receive **Kentucky SNAP** or **KTAP**.

<<STUD/GRADE/BLDG>>

If there are other children in your household who aren't listed above, *they also qualify for free meals.*

Please contact the school your child/children attend in the following situations:

- If there are other children in your household who are not listed above and you would like them to receive free meals at school
- You do not want your children to have free meals
- You have any additional questions

Sincerely,

**Sabrina Jewell**

Child Nutrition Director

Henderson County Schools

270-831-5015

[sabrina.jewell@henderson.kyschools.us](mailto:sabrina.jewell@henderson.kyschools.us)

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# Henderson County Schools

1805 Second Street, Henderson, Kentucky 42420  
(270) 831-5000 Fax: (270) 831-5009  
<http://www.hendersonschools.net>

<<GUARDIAN>>  
<<ADDRESS>>

## WE MUST CHECK YOUR APPLICATION

*You must send the information we need, or contact Janie Suddoth by October 15, or your child(ren) will stop getting free or reduced price meals.*

<<SCHOOL>> <<DATE>>

Dear <<GUARDIAN>>:

We are checking your Free and Reduced Price School Meals Application. Federal rules require that we do this to make sure only eligible children get free or reduced price meals. You must send us information to prove that <<STUDENTS>> is/are eligible.

If possible, send copies, not original papers. If you do send originals, they will be sent back to you only if you ask.

1. IF YOU WERE RECEIVING BENEFITS FROM **Kentucky SNAP or Kentucky KTAP or FDPIR** WHEN YOU APPLIED FOR FREE OR REDUCED PRICE MEALS, OR AT ANY TIME SINCE THEN, SEND US A COPY OF ONE OF THESE:

- **Kentucky SNAP or Kentucky KTAP or FDPIR** Certification Notice that shows dates of certification.
- Letter from **Kentucky SNAP or Kentucky KTAP or FDPIR** office that shows dates of certification.
- Do not send your EBT card.

2. IF YOU GET THIS LETTER FOR A HOMELESS, MIGRANT, OR RUNAWAY CHILD, PLEASE CONTACT Midge Stribling, 270-831-5115 FOR HELP.

3. IF THE CHILD IS A FOSTER CHILD:

Provide written documentation that verifies the child is the legal responsibility of the agency or court or provide the name and contact information for a person at the agency or court who can verify that the child is a foster child.

4. IF NO ONE IN YOUR HOUSEHOLD RECEIVES **Kentucky SNAP or Kentucky KTAP or FDPIR** benefits: Send this page along with papers that show the amount of money your household gets from each source of income. The papers you send must show the **name** of the person who received the income, the **date** it was received, **how much** was received, and **how often** it was received. **Send information to: 1805 Second St, Henderson, KY 42420.**

Acceptable papers include:

***JOB:*** Paycheck stub or pay envelope that shows the amount and how often pay is received; letter from employer stating gross wages and how often you are paid; or, if you work for yourself, business or farming papers, such as ledger or tax books.

***SOCIAL SECURITY, PENSIONS, OR RETIREMENT:*** Social Security retirement benefit letter, statement of benefits received, or pension award notice.

***UNEMPLOYMENT, DISABILITY, OR WORKER'S COMP:*** Notice of eligibility from State employment security office, check stub, or letter from the Worker's Compensation's office.

***WELFARE PAYMENTS:*** Benefit letter from the **Kentucky KTAP** office.

***CHILD SUPPORT OR ALIMONY:*** Court decree, agreement, or copies of checks received.

***OTHER INCOME (SUCH AS RENTAL INCOME):*** Information that shows the amount of income received, how often it is received, and the date received.

***NO INCOME:*** A brief note explaining how you provide food, clothing, and housing for your household, and when you expect an income.

***MILITARY HOUSING PRIVATIZATION INITIATIVE:*** Letter or rental contract showing that your housing is part of the Military Privatized Housing Initiative.

***TIMEFRAME OF ACCEPTABLE INCOME DOCUMENTATION:*** Please submit proof of one month's income; you could use the month prior to application, the month you applied, or any month after that.

If you have questions or need help, please call Janie Suddoth at 270-831-5015. The call is free. [Toll free or reverse charge explanation]. You may also e-mail us at [janie.suddoth@henderson.kyschools.us](mailto:janie.suddoth@henderson.kyschools.us).

Sincerely,

**Sabrina Jewell**  
**Child Nutrition Director**  
**Henderson County Schools**

**Privacy Act Statement:** The Richard B. Russell National School Lunch Act requires the information on this application. You do not have to give the information, but if you do not, we cannot approve your child for free or reduced price meals. We will use your information to determine if your child is eligible for free or reduced price meals, and for administration and enforcement of the lunch and breakfast programs.

**Non-Discrimination Statement:** This explains what to do if you believe you have been treated unfairly. "In accordance with Federal Law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, or disability. To file a complaint of discrimination, write USDA, Director, Office of Adjudication, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410 or call toll free (866) 632-9992 (Voice). Individuals who are hearing impaired or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339; or (800) 845-6136 (Spanish). USDA is an equal opportunity provider and employer."

# Henderson County Schools

1805 Second Street, Henderson, Kentucky 42420

(270) 831-5000 Fax: (270) 831-5009

<http://www.hendersonschools.net>

<<GUARDIAN>>

<<ADDRESS>>

## WE HAVE CHECKED YOUR APPLICATION

<<SCHOOL>>

<<DATE>>

Dear <<GUARDIAN>>:

We checked the information you sent us to prove that <<STUDENTS>> are eligible for free or reduced price meals and have decided that:

- ☐ Your child(ren)'s eligibility has not changed.
- ☐ Starting \_\_\_\_\_, your child(ren)'s eligibility for meals will be changed **from reduced price to free** because your income is within the free meal eligibility limits. Your child(ren) will receive meals at no cost.
- ☐ Starting \_\_\_\_\_, your child(ren)'s eligibility for meals will be changed **from free to reduced price** because your income is over the limit. Reduced price meals cost **\$0.40** for lunch and **\$0.30** for breakfast.
- ☐ Starting \_\_\_\_\_, **your child(ren) is/are no longer eligible** for free or reduced price meals for the following reason(s):
  - \_\_\_ Records show that no one in your household received **Kentucky SNAP** or **Kentucky TANF** benefits.
  - \_\_\_ Records show that the child(ren) is/are not homeless, runaway, or migrant.
  - \_\_\_ Your income is over the limit for free or reduced price meals.
  - \_\_\_ You did not provide:  
\_\_\_\_\_
  - \_\_\_ You did not respond to our request.

Meals cost **\$1.55** for lunch and **\$0.90** for breakfast. If your household income goes down or your household size goes up, you may apply again. If you were previously denied benefits because no one in the household received **Kentucky SNAP**, **Kentucky TANF** or **FDPIR** benefits, you may reapply based on income eligibility. If you did not provide proof of current eligibility, you will be asked to do so if you reapply.

If you disagree with this decision, you may discuss it with **Janie Suddoth** at **270-831-5015**. You also have the right to a fair hearing. If you request a hearing by \_\_\_\_\_, your child(ren) will continue to receive free or reduced price meals until the decision of the hearing official is made. You may request a hearing by calling or writing to: Dr. Thomas L. Richey, 1805 Second St, Henderson, KY 42420, 270-831-5000.

Sincerely,

Sabrina Jewell  
Child Nutrition Director  
Henderson County Schools

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## SHARING INFORMATION WITH MEDICAID/KCHIP

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Dear Parent/Guardian:

If your children get free or reduced price school meals, they may also be able to get free or low-cost health insurance through Medicaid or the State Children's Health Insurance Program (KCHIP). Children with health insurance are more likely to get regular health care and are less likely to miss school because of sickness.

Because health insurance is so important to children's well-being, *the law allows us to tell Medicaid and KCHIP that your children are eligible for free or reduced price meals, **unless you tell us not to.*** Medicaid and KCHIP only use the information to identify children who may be eligible for their programs. Program officials may contact you to offer to enroll your children. Filling out the Free and Reduced Price School Meals Application does not automatically enroll your children in health insurance.

If you do not want us to share your information with Medicaid or KCHIP, fill out the form below and send in (Sending in this form will not change whether your children get free or reduced price meals).

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☐

**No! I DO NOT** want information from my Free and Reduced Price School Meals Application shared with Medicaid or the Kentucky Children's Health Insurance Program.

If you checked no, fill out the form below to ensure that your information is NOT shared for the child(ren) listed below:

Child's Name: \_\_\_\_\_ School: \_\_\_\_\_

Child's Name: \_\_\_\_\_ School: \_\_\_\_\_

Child's Name: \_\_\_\_\_ School: \_\_\_\_\_

Child's Name: \_\_\_\_\_ School: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Address: \_\_\_\_\_

For more information, you may call **Sabrina Jewell** at 270-831-5015 or e-mail at [sabrina.jewell@henderson.kyschools.us](mailto:sabrina.jewell@henderson.kyschools.us).

Return this form to: 1805 Second St., Henderson, KY 42420 by September 15, 2011.

## SHARING INFORMATION WITH OTHER PROGRAMS

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Dear Parent/Guardian:

To save you time and effort, the information you gave on your Free and Reduced Price School Meals Application may be shared with other programs for which your children may qualify. For the following programs, we must have your permission to share your information. Sending in this form will not change whether your children get free or reduced price meals.

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- ☐ Yes! I **DO** want school officials to share information from my Free and Reduced Price School Meals Application with **C.A.T.C.H.**
- ☐ Yes! I **DO** want school officials to share information from my Free and Reduced Price School Meals Application with **FRYSC.**
- ☐ Yes! I **DO** want school officials to share information from my Free and Reduced Price School Meals Application with **21<sup>st</sup> Century grant programs.**

If you checked yes to any or all of the boxes above, fill out the form below to ensure that your information is shared for the child(ren) listed below. Your information will be shared only with the programs you checked.

Child's Name: \_\_\_\_\_ School: \_\_\_\_\_

Child's Name: \_\_\_\_\_ School: \_\_\_\_\_

Child's Name: \_\_\_\_\_ School: \_\_\_\_\_

Child's Name: \_\_\_\_\_ School: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Address: \_\_\_\_\_

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For more information, you may call **Sabrina Jewell** at **270-831-5015** or e-mail at **sabrina.jewell@henderson.kyschools.us**.

Return this form to: **1805 Second St., Henderson, KY 42420** by **September 15, 2011**.

## Henderson County Schools

### Child Nutrition Department

#### Meal Counting and Collection Procedures

Nutrikids is the computer system used by the Henderson County Board of Education for the point of sale service system. Each serving line has a computer which is networked with the computer terminal on another serving line (if one exists) and with the computer in the manager's office. All food service computers in the schools are networked with the main computer in the Child Nutrition Director's office via modem.

#### COLLECTION PROCEDURE

Verbal Identifier – Each student in each school is assigned a four digit number which they will punch into a pin pad at the point of service as reimbursable meals are received. The student's name, classroom, grade, etc. come up on the computer screen whenever the student submits their ID number. Each student's eligibility category is coded into the computer program. The number one (appears in the corner of the screen) designates free eligibility; the number two designates reduced; and the number three designates a full paid status.

If a student forgets his/her ID number, the cashier is able to look up this child's name and verify information with this student and give them their number again.

The Nutrikids program is designed to count and record the meal by category according to the student's eligibility. Since the computers are networked, a student ID number can only be used once for each meal (breakfast and lunch) each day, consequently, a student is only able to be served one reimbursable meal breakfast and lunch each day.

There are four methods of payment for meals: prepayment, cash on the line (at the point of service), post-billing, and online payments set up through e-funds. Students who pay full price or a reduced price for their meals have the option of paying on a weekly, monthly or annual basis. All students have the option of prepaying for ala carte items also.

Henderson County BOE policy does allow students to charge meals and students are not allowed to charge ala carte items. If a student is charging their meal, the cashier has a particular key to enter indicating a charged meal on that student's account. On a regular basis, parents receive letters, e-mail and/or phone calls when their children's account has an outstanding balance that is unpaid. When meal charges continue to go unpaid, parents are contacted by phone and/or mailed a letter from the food service director and/or the principal. Sometimes Family Resource may even make a home visit.

#### PREPAYMENT

Students have the ability to prepay for their meals before school begins each morning or on the line. Parents may also choose to set up online payments through e-funds located on our district website (this procedure is in the process of being set up). This information is entered into the automated computer system and each time the student buys a reimbursable meal and/or ala carte item, the system pulls up

the student's account and subtracts the correct amount for the meal received and it is counted by category.

Through e-funds, parents enter the child's district ID number to begin set up. The parent enters how much he/she wants to pay on the child's account. They also select the school where the child attends. The system interacts with Nutrikids to show this deposit at point of sale. As with any prepayment, the amount of each meal or ala carte item is deducted at point of sale as with any sell. E-funds is also designed to send e-mail to parents to remind them when the child's account gets below their chosen set amount.

#### CASH ON LINE

Students also have the option to pay cash on the line. Students enter their number into the pinpad at the point of service. Students, once identified, would pay the appropriate amount for their category.

A back up roster is kept on site in the event the computer program and/or equipment is inoperable. This alphabetical listing has all the pertinent information-name of student, ID number, grade, address, etc., and indicates the eligibility status.

#### END OF DAY PROCESSING

A computer printout is generated at the end of each meal which calculates the number of reimbursable and non-reimbursable meals, ala carte sales, etc. The computer generates the following reports – a daily count, cash reconciliation, a list of student charges, etc.

#### CASH CONTROL PROCEDURES

Each morning, the Child Nutrition Manager or cashier should obtain the change fund, verify the correct amount, and place in the cash register. The drawers are to remain locked throughout the day with the exception of meal time. The cashier stays by the register the entire time the drawer is unlocked.

Each cashier should check date and time on the computer and locate the master student list in case of computer malfunctions.

At the close of service each day, cashiers should remove the change fund from the drawer and place in the bank bag. Each cashier should count the money in the drawer. The cashier and manager should verify the following (money is two-party counted and confirmed daily):

- a. Change fund
- b. Cash drawer with a signed receipt of amount counted
- c. Computer printouts
- d. Over/short

The manager and cashier should check the computer reports for accuracy. The designated person should prepare the bank deposit and confirm all totals are correct. The money and deposit slip will be taken to the bank in a sealed bank deposit bag. If for any reason, the deposit cannot be made that day, the bank bag must be placed in the school's vault until it can be taken to the banks. NO FUNDS should be carried home for any reason. The two individuals who counted the money will initial both the Day

End Report and the bank deposit ticket. These reports should be kept on file for no less than three years.

The manager will run the Period End Report and the Monthly Claim Report from Nutrikids at the end of the month. All daily deposit slips MUST equal the deposits shown from the Nutrikids end of day totals. Deposit slips will be submitted weekly to the Food Service Bookkeeper.

#### FIELD TRIPS AND OFF-SITE FEEDING

The request for meals must be submitted to the Food Service Manager at least one week in advance.

The sponsor of the field trip must submit a complete list of all students attending the field trip the morning of, or earlier, in order to verify the names and enter the meals in Nutrikids. The meals will be sent in appropriate thermal containers to keep the food/beverage cold or hot depending on the type of food/beverage it is.

For other events where students may be at another school within the district, all attempts must be made to assure a complete list of student names is available and accurate counting is done to record who took a meal and who did not. A list from each school can be sent from the kitchen manager to the other school's kitchen manager that shows the child's status. This information is kept confidential and anything in writing is shredded after recording meals purchased that day.

Students who come for the day as a visitor from outside the school district, must be rung in as student visitor and must pay for the meal at the cash register.

### **Food Services**

The Board shall provide a District-wide school food service program in compliance with applicable statutes and regulations. It is the intent of the Board that school food services be a self-supporting program.

#### **BREAKFAST AND LUNCH**

Cafeterias shall provide complete hot or cold meals as defined by federal regulations.

#### **FOOD SERVICE DIRECTOR**

The District (or food service area to which the District belongs) shall appoint/select a Food Service Director (FSD) to oversee and manage the school food service program.

#### **ANNUAL REPORT/PUBLIC FORUM**

Immediately following the release of the nutrition report, the Board shall discuss the findings and seek public comment during a publicly advertised Board meeting.

By January 31 of each year, the Board shall hold an advertised public forum to present a plan to improve school nutrition in the District.

The District shall compile a summary of findings and recommendations and submit the summary to the Kentucky Board of Education.

#### **MEAL CHARGES**

Adults shall not be permitted to charge meals. Students may charge regular reimbursable lunch and breakfast for a limited time. No charging is allowed for extra a la carte items.

Parents will be notified weekly of student charges. Charges in excess of the limit shall require prior approval of the Principal/designee. Payment of cumulative charges is due within ten (10) days of the first charge.

If the parent does not make payment or other arrangements, students may be served an alternative meal and/or exclusion from extracurricular activities that are not part of the District's educational program.

To accommodate a possible change in a student's family income, the Principal/designee shall encourage students/parents to return a completed application for free or reduced price meals in the following instances:

1. When a student makes repeated charges; or
2. When a student reaches the limit allowed for accumulated charges and payment is not made in a timely manner.

Any unpaid account may be forwarded to the Board Attorney for collection.

Food Services

REFERENCES:

KRS 156.160  
KRS 158.852; KRS 158.856  
KRS 160.290  
702 KAR 006:010  
702 KAR 006:020  
702 KAR 006:040  
702 KAR 006:045  
702 KAR 006:050  
702 KAR 006:060  
702 KAR 006:075  
702 KAR 006:030  
702 KAR 006:050  
702 KAR 006:075  
702 KAR 006:090

Adopted/Amended: 03/15/2010  
Order #: 144

## **Meal Charge Procedures**

### **STUDENT MEAL CHARGES**

Meal charges are for emergency use only. If a student forgets his/her money or if the funds in a student's account have run out, the student will be allowed to charge a regular, reimbursable meal. Students will be allowed to charge meals up to maximum of ten dollars (\$10.00).

At no time will any student be allowed to charge ala carte food items or a second meal.

The Cafeteria Managers will run charge letters on a weekly basis for students with at least five dollars (\$5.00) in charges. Letters will be sent home with the student, mailed, or e-mailed to parents.

If funds are not sent and the student reaches \$10.00 in charges, the student will be required to call parent/guardian before meal service requesting funds.

If charges are not paid and the student reaches the \$20.00 limit, the Child Nutrition Manager and the Principal/designee will attempt to make contact with the parent/guardian by phone, e-mail, letter, and/or OneCall.

If the account exceeds \$40 and the parent has not made any payment arrangements, the Child Nutrition Director and the school Principal will notify the parent/guardian that the account must be brought current within ten (10) days or the student may face restrictions exclusion from extracurricular activities that are not part of the District's educational program or receiving an alternate meal for lunch (cold sandwich and milk [exceptions made for allergies]).

If there is still no response, the District reserves the right to take any necessary legal action to collect charges owed.

In the event that a student transfers to a school within the District, the account balance will transfer with the student. If charges are owed, the approved charge policy will remain in effect.

### **FREE/REDUCED MEAL APPLICATIONS**

Free/reduced meal applications are available from the Cafeteria Office, Child Nutrition Department, and the local schools. If parents cannot pay for meals, they should contact the Cafeteria Manager or the Child Nutrition Director (270-831-5015).

### **ADULT MEAL CHARGES**

There will be no adult faculty/staff charges allowed. Adults are encouraged to make regular deposits into their accounts. Cashiers will inform staff when their accounts fall below five dollars (\$5.00).



## ANNUAL NOTICE OF NON-DISCRIMINATION

### Public Notice Henderson County Schools Notice of Non-Discrimination

Students, their families and potential employees of the Henderson County Schools are hereby notified that the Henderson County School System does not discriminate on the basis of race, color, national origin, age, religion, marital status, sex or disability in employment, vocational programs, or activities as set forth in compliance with federal and state statutes and regulations.

Any persons having inquiries concerning Henderson County Schools' compliance with Title II, Title IV, Title VI, Title IX and/or Section 504 may contact:

Bruce Swanson, Director of Human Resources  
Henderson County Schools  
1805 Second St.  
Henderson, KY 42420  
270-831-5000  
[Bruce.swanson@henderson.kyschools.us](mailto:Bruce.swanson@henderson.kyschools.us)

Lisa Crook, Director of Special Education  
Henderson County Schools  
1805 Second St.  
Henderson, KY 42420  
270-831-5000  
[Lisa.crook@henderson.kyschools.us](mailto:Lisa.crook@henderson.kyschools.us)

The Henderson County School System offers the following career and technical education programs for all students regardless of race, color, national origin, including those with limited English proficiency, sex or disability in grade 9-12: Agriculture, Business and Office Technology, Health Sciences, Automotive Repair, Engineering, Carpentry, and Welding. Persons seeking further information concerning the vocational education offerings and specific pre-requisite criteria should contact:

Victor Doty, Director of Career and Technical Education  
Henderson County High School  
2424 Zion Rd  
Henderson, KY 42420  
270-831-8850  
[victor.doty@henderson.kyschools.us](mailto:victor.doty@henderson.kyschools.us)

To obtain this information in a language other than English, call 270-831-5000.

**KENTUCKY DEPARTMENT OF EDUCATION**  
**Division of Nutrition and Health Services**  
**Civil Rights Grievance Report Procedures**

In accordance with FNS Instruction 113-1, the Henderson County BOE Child Nutrition Department provides a grievance procedure in the event a person believes he/she or their enrolled participant has been discriminated against and/or denied service on the basis of race, color, national origin, sex, age or disability in the food service program provided by the Henderson County BOE Child Nutrition Department.

**GENERAL INSTRUCTIONS**

All complaints, written or verbal, alleging discrimination on the basis of race, color, national origin, sex, age or disability shall be processed within ninety (90) days of receipt in the manner prescribed in this instruction.

**Procedure for Filing Complaints of Discrimination**

**1. Right to File a Complaint**

Any person alleging discrimination based on race, color, national origin, sex, age or disability has a right to file a complaint within 180 days of the alleged discriminatory action. Under special circumstances this time limit may be extended.

**2. Acceptance**

All complaints, written or verbal, shall be accepted by the Division of Nutrition and Health Services and forwarded to the SERO-USDA. It is necessary that the information be sufficient to determine the identity of the agency or individual toward which the complaint is directed, and to indicate the possibility of a violation. Anonymous complaints shall be handled as any other complaint.

**3. Verbal Complaints**

In the event that a complainant makes the allegation verbally or through a telephone conversation and refuses or is not inclined to place such allegations in writing, the person to whom the allegations are made shall write up the elements of the complainant for the complainant. Every effort shall be made to have the complainant provide the following information:

- a. Name, address, telephone number, or means of contacting the complainant.
- b. The specific location and name of the entity delivering the program, service, or benefit.
- c. The nature of the incident(s) or action(s) that led the complainant to believe discrimination was a factor.
- d. The basis on which the complainant feels discrimination exists (race, color, national origin, sex, age, disability)
- e. The names, titles and addresses of the persons who may have knowledge of the discriminatory action(s).
- f. The date(s) during which the alleged discriminatory action occurred, or if continuing, the duration of such actions.

## Civil Rights Grievance Report Form

Name \_\_\_\_\_

Date \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

If your grievance concerns a discriminatory action due to race, color, national origin, sex, age, or disability, please be very specific and give full details concerning the occurrence.

State the reason(s) you are filing this grievance report.

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What response did you receive from the sponsor representative during the alleged occurrence?

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What results are you seeking from this communication?

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\_\_\_\_\_  
Signature of Complainant

\_\_\_\_\_  
Date

## Civil Rights Grievance Report Form

**Information on person filing grievance:**

Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone Number \_\_\_\_\_

**Date Received by Sponsor** \_\_\_\_\_

**Director's Name** \_\_\_\_\_

**Date forwarded to KDE** \_\_\_\_\_

**RESOLUTION/COMMENTS:**

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\_\_\_\_\_  
Signature of Sponsor Representative

\_\_\_\_\_  
Date

## **Henderson County Schools**

### **Child Nutrition Procurement Plan**

The Henderson County Schools plan for procuring items for use in the Child Nutrition Program is as follows. The centralized procurement plan provides for free and open competition, transparency in transactions, comparability, and documentation of all procurement.

#### **Code of Conduct**

The following conduct will be expected of all persons who are engaged in the award and administration of contracts supported by Child Nutrition Program Funds.

1. No employee, officer, or agent of the District shall participate in selection or in the award or administration of a contract supported by Program funds if a conflict of interest, real or apparent, would be involved. Conflicts of interest arise when one of the following has a financial or other interest in the firm selected for the award:
  - a. District employee, officer, or agent;
  - b. Any member of his/her immediate family;
  - c. His/her partner;
  - d. An organization that employs or is about to employ one of above.
2. District employees, officers, or agents shall neither solicit nor accept gratuities, favors, or anything of monetary value from contractors, potential contractors, or parties to subagreements.
3. The purchase during the school day of any food or service from a contractor for individual use is prohibited.
4. The removal of any food, supplies, equipment, or school property such as records, recipe books, and the like is prohibited.
5. The outside sale of such items as used oil, empty cans, and the like will be sold by contract between the district and the outside agency. Individual sales by any school person to an outside agency or other school person is prohibited.

#### **Disciplinary Action**

Failure of any employee to abide by the above-stated code may result in disciplinary action, including but not limited to, a fine, suspension, or dismissal.

#### **Review Procedures**

The SFA shall agree to retain all books, records and other documents relative to the award of the contract agreement for three (3) years after final payment. Specifically shall maintain, at a minimum, the following documents:

- Written rationale for the method of procurement;
- A copy of the RFP or IFB;
- The selection of contract type;
- The bidding and negotiation history and working papers;

- The basis for contractor selection' approval from the State agency to support a lack of competition when competitive bids or offers are not obtained;
- The basis for award cost or price;
- The terms and conditions of the contract;
- Any changes to the contract and negotiation history;
- Billing and payment records;
- A history of any contractor claims; and
- A history of any contractor breaches.

### **Method of Procurement Used**

District small purchase procedures may be used for any contract in which the aggregate amount does not exceed \$20,000. (KRS 45A.385)

### **Like Items in Excess of \$20,000**

If the total amount of purchases for like items is \$20,000 or more, formal bid procedures will be utilized. Food, food products, supplies, and equipment will be bid annually in August.

### **Bid Specifications**

1. The bid specifications, including delivery and storage instructions, for all lunchroom/cafeteria supplies shall be prepared by the SFS Coordinator.
2. The request for bid shall be advertised in the local newspaper with the greatest circulation in the District.
3. Specifications and bid documents shall be mailed to all potential bidders.
4. Bids shall be opened and tabulated by the SFS Coordinator.
5. Bids shall be opened and tabulated by the SFS Coordinator.
6. The bids shall be submitted to the Board of Education for action.

### **Perishables and Noncompetitive Negotiations**

All items shall be bid except perishable meat, fish, fruits, and vegetables. A negotiated price for perishables (meat, fish, fruits, vegetables) shall be obtained each week or month by the School Food Service Director from vendors serving the area. The School Food Service Director shall review these quotations and select the lowest and best bid offered.

Noncompetitive negotiations may also be used for one-time purchases of a new food item in order to determine student acceptance and samples for testing purposes. A log of all noncompetitive negotiation purchases shall be maintained and reviewed by the review official.

### **Emergency Purchases**

If it is necessary to make an emergency purchase in order to continue service, the purchase shall be made and a log of all such purchases shall be maintained and reviewed by the SFS Coordinator.

The log of emergency purchases shall include: item name, dollar amount, vendor, and reason for emergency.

### **Records Management**

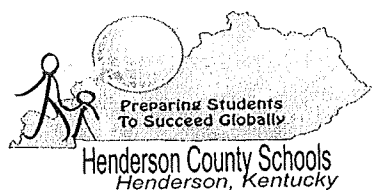
The following records will be maintained for a period of three (3) years plus the current year:

1. Records of all phone quotes
2. Logs of all emergency and noncompetitive purchases
3. All written quotes and bid documents
4. Comparison of all price quotes and bids with the effective dates shown
5. Price comparison showing bid or quote awarded
6. Log of approval substitutions

### **Open Bidding**

In all applicable cases, food, food products, supplies, and equipment used by the school food service program shall be purchased by open bidding, in accordance with procedures established in District Policy 04.32 and all appropriate federal regulations.

### **Contract Provisions**



HENDERSON COUNTY BOARD OF EDUCATION

1805 SECOND STREET

HENDERSON, KENTUCKY 42420

WWW.HENDERSON.KYSCHOOLS.US

### **INVITATION TO BID**

The Henderson County Board of Education invites you to submit a written sealed bid for:

### **BID SUMMARY INFORMATION**

<b>BID NUMBER</b>	
<b>DESCRIPTION OF BID</b>	
<b>LOCATIONS COVERED BY BID</b>	All School Cafeterias and Child Cares
<b>DATE &amp; TIME OF BID OPENING</b>	
<b>DATE &amp; TIME OF BID AWARD</b>	
<b>EFFECTIVE PERIOD OF BID</b>	
<b>RENEWABLE OPTIONS</b>	Annual renewal up to three years with approval

Bidders must read the entire bid details and indicate acceptance by submitting the required **Bid Submission Form**.

### **CONDITIONS OF BIDDING**

- A. **TIME AND PLACE OF BIDDING** - Bids will be received in the office of the Board of Education, 1805 Second Street, Henderson, Kentucky, until \_\_\_\_\_. All bids must be received by the time designated in the invitation and none will be considered thereafter. All bids should be sealed and labeled "Bid – \_\_\_\_\_" Bid No. \_\_\_\_\_, Deadline \_\_\_\_\_.

At the specified time stated above, all bids that are in order, properly sealed, signed, labeled, etc., shall be opened and read aloud. Any interested parties may attend the opening. No immediate decision will be rendered on this date.

- B. **AWARDING THE CONTRACT** - No bid shall be withdrawn after the closing time stated above. Bid shall be effective from \_\_\_\_\_ through \_\_\_\_\_. After bids have been tabulated and studied, agents and/or company representatives may be interviewed by the superintendent or designated person concerning the bid.

The board will review these bids formally at the regular board meeting on Monday, \_\_\_\_\_ at 6:00 PM and make final bid award determination.



The board reserves the right to reject any and/or all bids and to waive any deviations from the specifications that it considers of little consequence.

Information pertaining to any item or condition in this bid request may be obtained by calling Becky Willett, Child Nutrition Dept., at (270) 831-5015.

C. General Conditions:

1. All bids are subject to the terms and conditions of the Bid Invitation.
2. Bidders shall submit their bids on this Bid Invitation only. Return to 1805 Second Street. Henderson, KY 42420.
3. Bids shall be made for furnishing such items as ordered by each school beginning July 1, \_\_\_\_\_ through June 30, \_\_\_\_\_.
4. Bids will be received on the unit price as specified and shall include delivery to each school. Delivery shall be interpreted as meaning that the merchandise shall be placed in the designated storage area as indicated by each individual cafeteria manager. The successful bidder shall be expected to have each delivery checked by the individual manager or designated person and to leave a signed copy of the itemized delivery ticket with the recipient. Account shall be set up for each School Cafeteria and each Child Care.
5. The successful bidder shall be required to furnish at bid price, such quantities as from time to time may be ordered by the individual schools and Child Care Centers. All items bid shall be delivered by vendors to the various schools in Henderson County on the day needed and by 9:00 A.M. Delivery schedule may be modified by approval of Cafeteria Manager, Principal, or Child Nutrition Director.
6. Bid prices must be firm for 20\_\_-20\_\_ (July 1, 20\_\_ - June 30 20\_\_)

7. The Board of Education reserves the right to make an award to individual vendors for each item, for a group of items, or for all items. The Board of Education reserves the right to accept or reject all or any portion of any bid.
8. Individual schools will order the \_\_\_\_\_ Products, as needed.
9. Any offers of bonuses or coupons shall warrant forfeiture of contracts awarded.
10. The award shall be made, if at all, on the basis of the lowest evaluated bid price. The following evaluation criteria will be used:

	Description of Bid Evaluation Criteria	Maximum Points
a.	<b>Quality</b> of Product and Services provided.	10
b.	<b>Service</b> - (1) Business reputation of the vendor compared to similar vendor in the general area for promptness of delivery, (2) general cooperation by the vendor with the respective school personnel.	10
c.	<b>Availability</b> of items and services needed.	10
d.	<b>Cost</b> of items bid based on specific price details for specific items listed on bid submission form.	10
e.	<b>Delivery</b> of product or services.	10

11. CONFLICTS OF INTEREST, GRATUITIES AND KICKBACKS AS DEFINED IN KRS 45A.445 AND AS PROVIDED FOR IN KRS 45A.455 ARE ABSOLUTELY PROHIBITED. THE PROVISIONS OF THESE STATUTES SHALL BE NOTED AND ACKNOWLEDGED BY THE USERS OF THIS PROCUREMENT DOCUMENT.
12. Statements are due at the Child Nutrition Office immediately after the close of the month. Statements should be addressed: Center for Support Services/Child Nutrition, Attn: Becky Willett, 1805 Second Street, Henderson, KY 42420. Monthly statements listing amounts payable by the various accounts of the Henderson County Board of Education shall be sent to the appropriate addresses as requested or by email at [becky.willett@henderson.kyschools.us](mailto:becky.willett@henderson.kyschools.us) or fax at (270) 831-5016 attn: Becky Willett. The accounts shall be closed after the last delivery of each calendar month.
13. If a bid is not made, the bid form must be returned and marked "NO BID" with reason stated why a bid is not submitted, otherwise firm name will be removed from the mailing roster.
14. The Henderson County Board of Education and its schools are exempt from Federal Excise Taxes and Kentucky Sales and Use Taxes.

15. Bids are submitted that fail to reflect unit prices called for on the bid form (per ounce, pound, case, gallon, roll, etc.) may be determined as non-responsive and thus eliminated from consideration.
16. The Henderson County School District, all authorized agencies of the Commonwealth of Kentucky, The United States Department of Agriculture, the Comptroller of the United States, and/or any of their respective authorized representatives shall have access to all books, documents, papers and records of any successful bidder awarded a procurement contract pursuant to this Invitation to Bid which are directly relevant or pertinent to such contract for the purpose of making audits, examinations, excerpts and transcriptions; and, any such successful vendor shall maintain all of its records relevant to such procurement contract for a period of three years after the Henderson County School District makes final payment to the vendor and all pending matters are closed.
17. All procurement contracts exceeding Twenty Thousand Dollars (\$20,000.00) in amount awarded to a successful vendor pursuant to this Invitation to Bid and any of their contractors or subcontractors are subject to Executive Order 11246, entitled "Equal Employment Opportunity", as amended by Executive Order 11375, and as supplemented in Department of Labor Regulations. (41 CFP Part 60)
18. Erasures or the use of the typewriter correction fluid on bid forms are not acceptable any may result in the rejection of the bid. Prior to submission or opening, errors may be crossed and corrections entered, and initialed by the person signing the bid. No bids shall be altered or amended after the specified time for opening.
19. Quantities. It shall be understood by all parties concerned that any procurement contract awarded as a result of this Invitation to Bid shall not obligate the Henderson County School District to receive and quantity in excess of actual requirements. Quantities requirements for all items with volatile prices shall be projected as far in advance as practical, usually with the lead time of two to four weeks in advance of usage. Vendors are required to bid and deliver all items listed, as well as items which may be added later. Any questions concerning a vendor's capability to bid or deliver an item shall be raised with the School District authorities at least two weeks prior to bid openings.
20. Exclusivity. With respect to a successful bidder awarded a procurement contract pursuant to this Incitation to Bid, the School District intends to use the vendor as an exclusive source for the various items and services bid by it as well as for comparable substitutes and supplemental emergency. That being the case, the successful bidder reciprocally agrees to provide total requirements as provided in

its bid thereby minimizing occurrences when the School District may have to seek other interim product sources. Failure to deliver 100% of the items bid within 48 hours shall be considered a default. In case of default notice (oral or written) may procure the necessary supplies from other sources and hold the successful vendor responsible for any excess cost occasioned thereby. Continuous instances of default may result in cancellation of the contract and removal of the bidder from the bid list for the duration of the ensuing year, at the option of the School District.

21. Termination. All procurement contracts awarded by the School District pursuant to this Invitation to Bid may be by the School District terminated at any time upon thirty days notice; upon mutual agreement of both parties; or at the discretion of the School District, without notice, if the terms of the contract are violated in any way.
22. Bidder Reliability. A successful bidder must have a proven (or believable) record of service, particularly with respect to delivering all items on a regularly scheduled basis, at favorable prices. A vendor may be designated as unacceptable if the requirements listed herein have been previously violated and/or poor communication exists between the vendor and the School District.
23. Modifications, additions or changes to the terms and conditions of this Invitation to Bid and any procurement contract issued pursuant to this Invitation to Bid may be a cause for rejection of the bid. Bidders are requested to submit all bids on the School District's Official form. Bids submitted on company forms may be rejected.
24. By the submission of a bid to the School District pursuant to this Invitation to Bid, the vendor certifies that his bid is made without prior understanding, agreement, or connection with any corporation, firm or person submitting a bid for the same materials, supplies or equipment and is in all respects fair and without collusion or fraud. The bidder certifies that he understands collusive bidding is a violation of federal law and can result in fines, prison sentences and civil damage awards. He further agrees to abide by all conditions of this bid and certifies that he is authorized to sign this bid for the bidder.
25. This Invitation to Bid, and all procurement contracts issued pursuant to this Invitation to Bid shall be governed in all respects, validity, construction, capacity, performance, breach and remedy, by the laws of the Commonwealth of Kentucky.
26. All vendors awarded a procurement contract pursuant to this Invitation to Bid certify to the School District that they are conforming to the provisions of the Civil Rights Act of 1964, as amended, and further that they shall comply with all applicable federal, state and local laws and regulations pertaining to wages, hours and conditions of employment. In connection with the vendor's work pursuant to any procurement contract issued pursuant to this Invitation to Bid, the vendor

agrees not to discriminate against any employee (s) or applicant (s) for employment because of age, race, religious creed, sex, national origin, or handicap.

27. The headings use in this Invitation to Bid are for the purpose of convenience only and are not meant to explain or limit the terms thereof in any manner whatsoever.
28. Buy American. When purchasing food products, The Board of Education will, whenever possible, purchase only food products that are produced in the United States. This shall apply in all instances except where the receiving agency determines that recipients have unusual or ethnic food preferences which can only be met through purchases of products not produced in the US; the product is not produced or manufactured in the US in sufficient and reasonable available quantities or a satisfactory quality; or the cost of US produced food product is significantly higher than foreign products.
29. This contract may be extended under the same terms and prices if agreeable by both parties, for an additional one year term, not to exceed three one year extension, with approval of the Henderson County Board of Education.

**D. SPECIFICATIONS:**

## BID SUBMISSION FORM

(Bids must be submitted on this form or an exact duplicate)

PRODUCTS

BID NO. \_\_\_\_\_

In compliance with this Invitation to Bid and in consideration of the detailed description attached hereto; subject to all conditions thereof, the undersigned agrees, if this be accepted within the time stipulated, to furnish any or all items upon which prices are quoted in accordance with the specifications applying at the price set opposite each item.

VENDOR NAME \_\_\_\_\_

BY \_\_\_\_\_

TITLE \_\_\_\_\_

ADDRESS \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

VENDOR TAX ID: \_\_\_\_\_

TELEPHONE \_\_\_\_\_

EMAIL: \_\_\_\_\_

FAX # \_\_\_\_\_

DATE \_\_\_\_\_

\_\_\_\_\_

(Authorized Signature)

#### CERTIFICATION STATEMENT

By signature below, I certify on behalf of the company and its key employees that neither the company or its key employees have been proposed for debarment, debarred or suspended by any Federal agency.

Authorized Signature \_\_\_\_\_

**CONFLICTS OF INTEREST, GRATUITIES AND KICKBACKS AS DEFINED IN KRS 45A.445 AND AS PROVIDED FOR IN KRS 45A.455 ARE ABSOLUTELY PROHIBITED. THE PROVISIONS OF THESE STATUTES SHALL BE NOTED AND ACKNOWLEDGED BY THE USERS OF THIS PROCUREMENT DOCUMENT.**

Equal Educational and Employment Institution

## Henderson County Schools

### Child Nutrition Program

#### **Special Dietary Needs & Food Allergies**

The Child Nutrition Department has a policy of providing modified menus for students who have physical or mental disabilities or special dietary needs and are unable to consume the regular lunch or breakfast menu items. This policy is in accordance with a federal mandate to include all students in the school nutrition programs and is in accordance with policy guidelines outlined in FNS Instruction 783-2, Revision 2, *Meal Substitutions for Medical or Other Special Dietary Reasons*. The Child Nutrition Department should be informed of any student who is unable to consume the meals normally served at the school in which they are enrolled.

Program regulations provide for the substitution of food items based on child-specific medical guidance. The regulations do not provide for the banning of selected foods for all students. The district believes that banning foods would be counter-productive and not in the best interest of all students at a specific school site. A concerted effort will be made to meet the nutritional needs and/or disability limitations of each student. Accordingly the district has outlined the responsibilities for parents, school sites and Food & Nutrition Services as follows:

##### **Parent Responsibilities:**

1. Notify the school of any food allergy, disability or special dietary need.
2. Provide medical certification approved by a recognized medical authority (RMA) authorized to practice within the State of Kentucky. Utilize the **Food Allergy Action Plan**.
3. Update the medical certification as needed.
4. Participate in any meetings or discussions regarding the student's meal plan.
5. Notify the school of any changes relating to the food allergy or special dietary need.

##### **School Site Responsibilities:**

1. Identify children requiring diet modifications. This will be accomplished primarily through registration materials and parental contact.
2. The school Nurse or Health Services Assistant will be notified and begin the process for the implementation of an Individual Health Services Plan (IHSP).
3. Request medical certification from parent or guardian. Utilize the **Food Allergy Action Plan**.
4. Send the medical certification to the Cafeteria Manager.
5. Additional responsibilities may include educational awareness for staff and students related to field trips, classroom parties, allergy alert identification and intervention.
6. Communicate plan requirements to all potential participants.
7. Monitor and update the plan as needed.

##### **Child Nutrition Department Responsibilities:**

1. Provide food item substitutions for students based on medical need supported by a medical certification signed by a recognized medical authority.
2. Menus will not be modified based on personal preference.
3. Provide training to cafeteria personnel on how to react to allergies and how to modify menus.
4. Communicate with parents, staff and medical authorities regarding diet modifications.
5. Maintain Special Diet information on each student in cafeteria office and in central office. This information will be updated annually.



# Food Allergy Action Plan

Student's

Name: \_\_\_\_\_ D.O.B.: \_\_\_\_\_ Teacher: \_\_\_\_\_

Place  
Child's  
Picture  
Here

ALLERGY TO: \_\_\_\_\_

Asthmatic Yes\* ☐ No ☐ \*Higher risk for severe reaction

## ◆ STEP 1: TREATMENT ◆

### Symptoms:

### Give Checked Medication\*\*:

\*\*(To be determined by physician authorizing treatment)

▪ If a food allergen has been ingested, but <i>no symptoms</i> :	<input type="checkbox"/> Epinephrine	<input type="checkbox"/> Antihistamine
▪ Mouth Itching, tingling, or swelling of lips, tongue, mouth	<input type="checkbox"/> Epinephrine	<input type="checkbox"/> Antihistamine
▪ Skin Hives, itchy rash, swelling of the face or extremities	<input type="checkbox"/> Epinephrine	<input type="checkbox"/> Antihistamine
▪ Gut Nausea, abdominal cramps, vomiting, diarrhea	<input type="checkbox"/> Epinephrine	<input type="checkbox"/> Antihistamine
▪ Throat† Tightening of throat, hoarseness, hacking cough	<input type="checkbox"/> Epinephrine	<input type="checkbox"/> Antihistamine
▪ Lung† Shortness of breath, repetitive coughing, wheezing	<input type="checkbox"/> Epinephrine	<input type="checkbox"/> Antihistamine
▪ Heart† Weak or thready pulse, low blood pressure, fainting, pale, blueness	<input type="checkbox"/> Epinephrine	<input type="checkbox"/> Antihistamine
▪ Other† _____	<input type="checkbox"/> Epinephrine	<input type="checkbox"/> Antihistamine
▪ If reaction is progressing (several of the above areas affected), give:	<input type="checkbox"/> Epinephrine	<input type="checkbox"/> Antihistamine

†Potentially life-threatening. The severity of symptoms can quickly change.

### DOSAGE

Epinephrine: inject intramuscularly (circle one) EpiPen® EpiPen® Jr. Twinject® 0.3 mg Twinject® 0.15 mg  
(reverse side for instructions)

Antihistamine: give \_\_\_\_\_  
medication/dose/route

Other: give \_\_\_\_\_  
medication/dose/route

**IMPORTANT: Asthma inhalers and/or antihistamines cannot be depended on to replace epinephrine in anaphylaxis.**

## ◆ STEP 2: EMERGENCY CALLS ◆

1. Call 911 (or Rescue Squad: \_\_\_\_\_). State that an allergic reaction has been treated, and additional epinephrine may be needed.

2. Dr. \_\_\_\_\_ Phone Number: \_\_\_\_\_

3. Parent \_\_\_\_\_ Phone Number(s) \_\_\_\_\_

4. Emergency contacts:  
Name/Relationship Phone Number(s)

1. \_\_\_\_\_ 1.) \_\_\_\_\_ 2.) \_\_\_\_\_

2. \_\_\_\_\_ 1.) \_\_\_\_\_ 2.) \_\_\_\_\_

IF PARENT/GUARDIAN CANNOT BE REACHED, DO NOT HESITATE TO MEDICATE OR TAKE CHILD TO MEDICAL FACILITY!

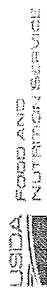
Parent/Guardian's Signature \_\_\_\_\_ Date \_\_\_\_\_

Doctor's Signature \_\_\_\_\_ Date \_\_\_\_\_

(Required)

Henderson County

05125199901



Paid Lunch Equity Tool for SY 2011-12 ONLY

Current Weighted Average Price Calculator				
Enter current prices and number of lunches sold at each price using October 2010 data.				
Monthly # of Paid Lunches	Paid Lunch Price	Monthly Revenue	Current Weighted Average Price	
1. 31,419	\$ 1.55	\$ 48,699.45		
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
TOTAL	31,419	\$ 48,699.45	\$	1.55

New Average Price Requirement (not rounded down to nearest 5 cents)	New Average Price Requirement (rounded down to nearest 5 cents)
\$	1.60
No change	

Note: New Average Price calculations include mandatory 2% rate increase plus 1.14% inflation rate

Pricing Estimation Calculator		
Below is a tool allowing users to manipulate prices to achieve the required new weighted average price.		
Monthly # of Paid Lunches	Paid Lunch Price	Weighted Average Price
1. 31,419	\$ 1.55	
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
TOTAL	31,419	\$ 1.55

Note: This tool is created to allow the user to only enter the number of paid lunches and the related prices. If any other parts of the tool are modified, the user runs the risk of calculating an incorrect new average price. Users should not modify the tool's current functionality.

Henderson Co

051251 999.01

Non-Federal Source Contribution Calculator		
Enter the total paid lunch count (includes all prices) for SY 2010 - 2011.		
Annual # of Paid Lunches	New Weighted Average Price minus Current Weighted Average Price	Annual Non-Federal Source Contribution
348,759	No increase	Non-Federal source contribution not needed

Note: Formula uses "rounded down" price in PLE tool.

Note: This tool is created to allow the user to only enter the annual number of paid lunches. If any other parts of the tool are modified, the user runs the risk of calculating an incorrect annual non-Federal source contribution. Users should not modify the tool's current functionality.

PLE  
Annual  
Totals  
12/11 SY

0. \*

383.47 +  
 419.63 +  
 314.19 +  
 367.53 +  
 270.77 +  
 300.64 +  
 383.11 +  
 460.00 +  
 327.29 +  
 260.96 +  
 3,487.59 \*

0. \*

Revised June 2010

Leftover Code: F=Freezer, W=Walk in, T=Tossed, B=Burned, SO=Served out

## HCS Food Usage Sheet

Date: \_\_\_\_\_

[illegible]

## Afterschool Snack Program School Application

### School Information Sheet

For each school seeking approval, submit the school information sheet and a program information sheet for each program that would be participating at the school.

SFA: Henderson County BOE Schools

Sponsor Number: 0512519990A

School Name: Henderson County High School

School Site Number: 051-251-060-0A

Time school day ends: 3:25 am \_\_\_\_\_ Area Eligible    ~~Yes~~    No

1. Documentation of Eligibility. If applying for area eligibility, document the percentage of free and reduced students at this school as reported to the State Agency for October 2010 (FY 2011). If utilizing a feeder school to qualify this school for area eligibility, document the name of the feeder school and their percentage of free and reduced students as reported to the State Agency October 2010 (FY2011).

Henderson County High School 46% (qualified by North Middle School 53% & South Middle School 53%)

2. Describe the meal counting and claiming procedures that will be utilized at this school for the after school care programs. Attach a copy of any forms that will be used.

Will use AASP procedures and meal count sheets

3. Are the snacks prepared at this schools kitchen? If not, identify where the snacks are prepared.

Yes, snacks are prepared in the school's kitchen.

Provide one month's planned snack menu. Provide menu items and corresponding portion sizes.

Monday	Tuesday	Wednesday	Thursday	Friday
<u>Chex mix</u> <u>1.75oz</u>  <u>100% juice 8</u> <u>oz</u>	<u>Banana ½ cup</u> <u>(or 1 whole)</u>  <u>Lowfat milk 8</u> <u>oz</u>	<u>Moonpie 2 oz</u>  <u>Lowfat milk 8</u> <u>oz</u>	<u>Sun chips 1 oz</u>  <u>100% juice 8</u> <u>oz</u>	
<u>Pretzels 1 oz</u>  <u>100% juice 8</u> <u>oz</u>	<u>Blueberry</u> <u>Muffin 1.8 oz</u>  <u>Lowfat milk 8</u> <u>oz</u>	<u>Sunflower</u> <u>seeds 1 oz</u>  <u>100% juice 8</u> <u>oz</u>	<u>Baked Tosio</u> <u>Scoops 7/8 oz</u>  <u>Lowfat milk 8</u> <u>oz</u>	
<u>Scooby Doo</u> <u>bones Graham</u> <u>Sticks 1 oz</u>  <u>100% juice 8</u> <u>oz</u>	<u>Cinnamon</u> <u>Applesauce 4 oz</u>  <u>Lowfat milk 8</u> <u>oz</u>	<u>Strawberry</u> <u>Chex Mix 1.75</u> <u>oz</u>  <u>Lowfat milk 8</u> <u>oz</u>	<u>Cereal Bar</u> <u>Cocoa Puffs ¼</u> <u>oz</u>  <u>100% juice 8</u> <u>oz</u>	
<u>Yogurt</u> <u>Danimals crush</u> <u>cup 4 oz</u>  <u>100% juice 8</u> <u>oz</u>	<u>Apple ½ (or 1</u> <u>whole)</u>  <u>Lowfat milk 8</u> <u>oz</u>	<u>Cheez-It</u> <u>Crackers 1.5 oz</u>  <u>100% juice 8</u> <u>oz</u>	<u>Blueberry</u> <u>muffin 1.8 oz</u>  <u>Lowfat milk 8</u> <u>oz</u>	

## Afterschool Program Information

### Program Information Sheet

\*Fill out a form for each program in the school for which afterschool snacks would be served.

School site: Henderson County High School

1. Name of the after school educational/care program: CHEERS

2. Snack service: Start date 9/6/11 End date 5/1/12

3. Days of program operation (circle)

Monday Tuesday Wednesday Thursday Friday

4. Program start time: 3:30pm

5. Number of students enrolled in the afterschool care program: 60

6. Age range of children: 13-18

7. Is this program operated or sponsored by the Board of Education? (Circle) Yes No

8. Program supervisors Name: Scott Wilson

9. Where in the school will the program be held? Multiple locations: cafeteria, library, classrooms, computer labs, sports complex

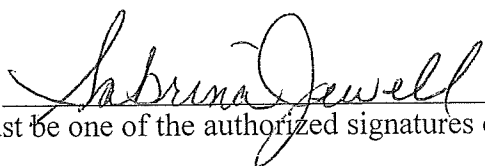


10. For after school child care programs, describe the educational or enrichment activities that are part of the applying program. For extended school day programs, describe the educational or enrichment instruction that will be given. Ensure the description includes how the related activities are provided in an organized and structured environment.

CHEERS provides one hour of instructional time to participating students (3:30-4:30 pm). This time is either homework help, tutoring, or time spent working on class projects.

Enrichment activities (4:30-5:25pm) will range from fitness classes, intramural sports, music lessons and cooking classes. These will be on a rotating, seasonal basis.

Signature of Authorized Representative:

  
(Must be one of the authorized signatures on the Statement of Authority)

Title:

\_\_\_\_ Child Nutrition Director \_\_\_\_\_

Date: 8/15/11

## Afterschool Snack Program School Application

### School Information Sheet

For each school seeking approval, submit the school information sheet and a program information sheet for each program that would be participating at the school.

SFA: Henderson County BOE Schools

Sponsor Number: 0512519990A

School Name: South Middle School

School Site Number: 051-251-150-0A

Time school day ends: 3:25 pm      Area Eligible    ~~Yes~~    No

1. Documentation of Eligibility. If applying for area eligibility, document the percentage of free and reduced students at this school as reported to the State Agency for October 2010 (FY 2011). If utilizing a feeder school to qualify this school for area eligibility, document the name of the feeder school and their percentage of free and reduced students as reported to the State Agency October 2010 (FY2011).

South Middle School 53%

2. Describe the meal counting and claiming procedures that will be utilized at this school for the after school care programs. Attach a copy of any forms that will be used.

Will use AASP procedures and meal count sheets

3. Are the snacks prepared at this schools kitchen? If not, identify where the snacks are prepared.

Yes, snacks are prepared in the school's kitchen.

## Afterschool Program Information

### Program Information Sheet

\*Fill out a form for each program in the school for which afterschool snacks would be served.

School site: South Middle School

1. Name of the after school educational/care program: Bulldog Boulevard

2. Snack service: Start date 9/6/11 End date 5/3/11

3. Days of program operation (circle)

Monday Tuesday Wednesday Thursday Friday

4. Program start time: 3:25 pm

5. Number of students enrolled in the afterschool care program: 100

6. Age range of children: 11-14

7. Is this program operated or sponsored by the Board of Education? (Circle) Yes No

8. Program supervisors Name: Breasha Pruitt, Linda Fletcher

9. Where in the school will the program be held? Cafeteria, gym, classrooms, media center

10. For after school child care programs, describe the educational or enrichment activities that are part of the applying program. For extended school day programs, describe the educational or enrichment instruction that will be given. Ensure the description includes how the related activities are provided in an organized and structured environment.

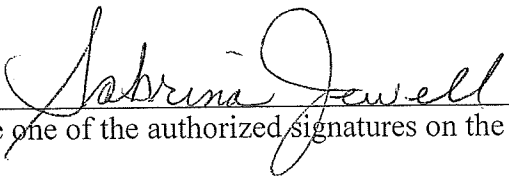
3:25 snack

3:40 academic assistance

4:30 enrichment: sports, wellness, guitar, cooking classes, Spanish

5:30 dismissal

Signature of Authorized Representative:

  
\_\_\_\_\_

(Must be one of the authorized signatures on the Statement of Authority)

Title:

\_\_\_\_ Child Nutrition Director \_\_\_\_\_

Date: 8/15/11

## Afterschool Snack Program School Application

### School Information Sheet

For each school seeking approval, submit the school information sheet and a program information sheet for each program that would be participating at the school.

SFA: Henderson County BOE Schools

Sponsor Number: 0512519990A

School Name: North Middle School

School Site Number: 051-251-065-0A

Time school day ends: 3:25pm      Area Eligible    ~~Yes~~    No

1. Documentation of Eligibility. If applying for area eligibility, document the percentage of free and reduced students at this school as reported to the State Agency for October 2010 (FY 2011). If utilizing a feeder school to qualify this school for area eligibility, document the name of the feeder school and their percentage of free and reduced students as reported to the State Agency October 2010 (FY2011).

North Middle School 53%

2. Describe the meal counting and claiming procedures that will be utilized at this school for the after school care programs. Attach a copy of any forms that will be used.

Will use AASP procedures and meal count sheets

3. Are the snacks prepared at this schools kitchen? If not, identify where the snacks are prepared.

Yes, snacks are prepared in the school's kitchen.

## Afterschool Program Information

### Program Information Sheet

\*Fill out a form for each program in the school for which afterschool snacks would be served.

School site: North Middle School

1. Name of the after school educational/care program: Cadet Cafe

2. Snack service: Start date 8/22/11 End date 5/3/11

3. Days of program operation (circle)

Monday Tuesday Wednesday Thursday Friday

4. Program start time: 3:25 pm

5. Number of students enrolled in the afterschool care program: 100

6. Age range of children: 11-14

7. Is this program operated or sponsored by the Board of Education? (Circle) Yes No

8. Program supervisors Name: Jodie Blemker

9. Where in the school will the program be held? Cafeteria, media center, gym, classrooms

10. For after school child care programs, describe the educational or enrichment activities that are part of the applying program. For extended school day programs, describe the educational or enrichment instruction that will be given. Ensure the description includes how the related activities are provided in an organized and structured environment.

3:25-3:45 snack

3:45-4:30 homework help

4:30-5:30 enrichment: cooking class, art, football, bowling

Signature of Authorized Representative:

Sabrina Jewell  
(Must be one of the authorized signatures on the Statement of Authority)

Title:

\_\_Child Nutrition Director\_\_

Date: 8/15/11

## Afterschool Snack Program School Application School Information Sheet

For each school seeking approval, submit the school information sheet and a program information sheet for each program that would be participating at the school.

SFA: Henderson County BOE Schools

Sponsor Number: 0512519990A

School Name: South Heights Elementary

School Site Number: 051-251-091-0A

Time school day ends: 2:20pm      Area Eligible    Yes    No

1. Documentation of Eligibility. If applying for area eligibility, document the percentage of free and reduced students at this school as reported to the State Agency for October 2010 (FY 2011). If utilizing a feeder school to qualify this school for area eligibility, document the name of the feeder school and their percentage of free and reduced students as reported to the State Agency October 2010 (FY2011).

South Heights 85%

2. Describe the meal counting and claiming procedures that will be utilized at this school for the after school care programs. Attach a copy of any forms that will be used.

Will use AASP procedures and meal count sheets

3. Are the snacks prepared at this schools kitchen? If not, identify where the snacks are prepared.

Yes, snacks are prepared in the school's kitchen.



## Afterschool Program Information

### Program Information Sheet

\*Fill out a form for each program in the school for which afterschool snacks would be served.

School site: South Heights Elementary

1. Name of the after school educational/care program: Blazer University

2. Snack service: Start date 9/19/11 End date 5/15/11

3. Days of program operation (circle)

Monday Tuesday Wednesday Thursday Friday

4. Program start time: 2:30 pm

5. Number of students enrolled in the afterschool care program: 82

6. Age range of children: 6-11

7. Is this program operated or sponsored by the Board of Education? (Circle) Yes No

8. Program supervisors Name: Melvin Anthony

9. Where in the school will the program be held? Classrooms, gym, cafeteria

10. For after school child care programs, describe the educational or enrichment activities that are part of the applying program. For extended school day programs, describe the educational or enrichment instruction that will be given. Ensure the description includes how the related activities are provided in an organized and structured environment.

Schedule by Group (homework help incorporated)				
Time	Group A	Group B	Group C	Group D
230-315	Snack & Homework	Snack & Homework	Snack & Homework	Snack & Homework
315-345	Enrichment	Enrichment	Gym	Gym
345-415	Gym	Gym	Enrichment	Enrichment
415-515	Cheer	Drama	Karate	Science Lab
515-530	Reflection/Dis missal	Reflection/Dis missal	Reflection/Dis missal	Reflection/Dis missal

Signature of Authorized Representative:

Sabrina Jewell  
(Must be one of the authorized signatures on the Statement of Authority)

Title:

Child Nutrition Director

Date: 8/15/11

### Student Welfare and Wellness

The health and safety of pupils shall be a priority consideration in all Board decisions.

The Board is committed to providing school environments that promote and protect student health, well-being, and ability to learn by supporting healthy eating and physical activity. To this end, the Board supports school efforts to implement the following:

- The District will engage students, parents, teachers, food service professionals, health professionals, and other interested community members in developing, implementing, monitoring, and reviewing this policy, as well as District-wide nutrition and physical activity opportunities, plans, and initiatives.
- All students will have opportunities, support, and encouragement to be physically active on a regular basis as provided by school/council policy.
- Foods and beverages sold or served at school will meet the nutrition recommendations of the *U.S. Dietary Guidelines for Americans*.
- Qualified child nutrition professionals will provide students with access to a variety of affordable, nutritious, and appealing foods that meet the health and nutrition needs of students; will accommodate the religious, ethnic, and cultural diversity of the student body in meal planning; and will provide clean, safe, and pleasant settings and adequate time for students to eat.
- To the maximum extent practicable, schools will participate in available federal school meal programs.
- Schools will provide nutrition education and physical education to foster lifelong habits of healthy eating and physical activity and will establish linkages between health education, school meal programs, and related community services.

#### **NUTRITION EDUCATION AND PROMOTION**

Each school will provide nutrition education and engage in nutrition promotion that:

- is offered at each grade level as part of a sequential, comprehensive, standards-based program designed to provide students with the knowledge and skills necessary to promote and protect their health;
- promotes fruits, vegetables, whole grain products, low-fat and fat-free dairy products, healthy food preparation methods, and health-enhancing nutrition practices;
- emphasizes caloric balance between food intake and energy expenditure (physical activity/exercise);
- links with school meal programs, other school foods, and nutrition-related community services;
- includes training for teachers and other staff.

#### **MONITORING**

The Superintendent/designee will monitor compliance with this and related policies. At the school level, the Principal/designee will monitor compliance with those policies in his/her school and will report on the school's compliance as directed by the Superintendent/designee.

**REFERENCE:** P. L. 108-265

Adopted/Amended: 06/19/2006

Order #: 208

Forms and Guidance | Help

## NSLP/SBP/SMP Agreement

SCN Help Desk 502-564-5632

Sponsor Name: HENDERSON CO. BOE

Sponsor Number: 051-251-999-0A

FEID: 616001295-EXX

In order to effectuate the purposes of the National School Lunch Act of 1946, the Child Nutrition Act of 1966, and the subsequent amendments to these acts (hereinafter referred to as the - "program"), the Kentucky Department of Education (hereinafter referred to as the State Agency (SA)) and the sponsor or other governing body (hereinafter referred to as the School Food Authority (SFA)) covenant to the terms of this agreement, as applicable to the program(s) for which the Sponsoring Agency has made application to the SA and as approved, agree as follows:

**FOR PARTICIPATION IN THE NATIONAL SCHOOL LUNCH PROGRAM THE STATE AGENCY AGREES TO:**

1. Reimburse the SFA for the program(s) in which participation has been approved by the SA , provided such services in the program(s) are the type(s) defined or described in the State and Federal program regulations and that these services are rendered consistent with existing regulations during the fiscal year(s) in which this agreement is effective and that reimbursement shall be made to the SFA to the extent of funds available and at rates as determined by applicable formulae or as otherwise assigned by the SA.
2. Provide general administration and supervisory assistance by SA personnel as deemed necessary and adequate for proper conduct of each program.

**THE SCHOOL FOOD AUTHORITY AGREES TO:**

The SFA and participating schools under its jurisdiction shall comply with all provision of 7 CFR Part parts 210 and 245.

1. Operate non-profit food service program(s) using all of the revenue accruing to the programs only for the operation or improvement of such service, provided, however, that such revenue shall not be used to purchase land or buildings. 'Revenue' when applied to this program means all monies received by or accruing to the nonprofit school food service in accordance with the SA's established accounting system including, but not limited to, children's payments, earnings on investments, other local revenue, state revenues and federal cash reimbursements.
2. Limit the net cash resources (operating balance) to an amount that does not exceed three months' average expenditures. The SA shall annually review the level and trend of net cash resources reported by the SFA. If the operating balance exceeds three(3) months' average expenditures, the SFA shall establish and implement a plan to reduce prices, improve food quality, or any other action deemed necessary.
3. Maintain full and accurate records of operations under this Agreement, including those set forth herein, and retain such records for a period of three years after the end of the fiscal year to which they pertain unless such records are a part of an unresolved audit which, thereby, extends the three year period. Records of revenue and expenditures shall be maintained in such a manner as to reflect the nonprofit status of the food service.
4. Maintain a financial management system and submit claims for reimbursement in accordance with procedures established by the SA.
5. Comply with the requirements of the Department's regulations regarding financial management (7 CFR part 3015 and 7 CFR part 3016, or 7 CFR part 3019 as applicable).
6. Submit a claim for reimbursement by the 15th day following the last day of the full month covered by the claim. Within 15 calendar days from the 16th of the month (including the 16th), you may submit a revised claim. The revised claim, along with a corrective action plan, located on the SCN website at <http://scn.ky.gov>, must be faxed to the Division of School and Community Nutrition Services. The corrective action plan must address the need for a revised claim, as well as the actions to be implemented to ensure that these errors do not recur. In accordance with 7 CFR 210.8, 215.10, 220.10, 225.9 and 226.10, any claims received more than 30 days following the close of the calendar month must be approved by the SA before processing.
7. Upon request, make all accounts and records pertaining to this program available to the SA/USDA for audit and review at a reasonable time and place.
8. Supply meals/milk without cost, or at a reduced price, to all children who are determined under the SFA's current approved free and reduced-price policy statement to be unable to pay the full price: make no discrimination against any child because of his ability to pay the full price of the meal/milk as specified in 7 CFR Part 245.
9. Claim reimbursement at the assigned rates only for reimbursable free, reduced price and paid lunches served to eligible children in accordance with 7 CFR part 210. Agree that the school food authority official signing the claim shall be responsible for reviewing and analyzing meal counts to ensure accuracy as specified in 210.8 governing claims for reimbursement. Acknowledge that failure to submit accurate claims will result in the recovery of an overclaim and may result in the withholding of payments, suspension or termination of the program as specified in 210.25. Acknowledge that if failure to submit accurate claims reflects embezzlement, willful misapplication of funds, theft or fraudulent activity, the penalties specified in 210.26 shall apply.

10. Maintain files of currently approved and denied free and reduced-price applications, respectively. If applications are maintained at the SFA level, they shall be readily retrievable by site. Such applications shall be retained for a period of three years after the end of the fiscal year to which they pertain, except that if audit findings have not been resolved, the records shall be retained beyond the three-year period as long as required for the resolution of issues raised by the audit.
11. Maintain production and menu records for the meals produced. These records must show how the meals contribute to the required food components, food items or menu items every day. In addition, for lunches, these records must show how the lunches contribute to the nutrition standards in paragraph (b) of section 7 CFR 210.10 and the appropriate calorie and nutrient levels for the ages/grades of the children in the school (see paragraphs (c), (d) or (i)(1) or (1), depending on the menu planning approach used) over the school week. If applicable, schools or school food authorities must maintain nutritional analysis records to demonstrate that lunches meet, when averaged over each school week:
  - i. The nutrition standards provided in paragraph (b) of 210.10,
  - ii. The nutrient and calorie levels for children for each age or grade group in accordance with paragraphs (c) or (i)(1) or developed under paragraph (1) of 210.10.
12. Serve lunches during the lunch period which meet the minimum meal requirements prescribed in 210.10.
13. Price meals as a unit which meet the minimum meal requirements, and which are served during a period designated as the meal period by the SFA. Prices for all a la carte sales should be commensurate with their costs.
14. Implement the lunch 'offer versus serve' provision in all senior high schools as required by regulations, and at its option, extend this provision below senior high.
15. Comply with the requirements of the Department's regulations regarding nondiscrimination (7 CFR Part 15, 15a, 15b).
16. Claim for reimbursement only those meals served to children. For purposes of this agreement, 'child' is defined as:
  - i. In traditional schools, a student of high school grade or under as determined by the State Educational Agency, including students who are mentally or physically handicapped as defined by the State and who are participating in a school program established for the mentally or physically handicapped.
  - ii. In residential child care institutions, a person who is under 21 chronological years of age.
17. Count the number of free, reduced price and paid reimbursable meals served to eligible children at the point of service, or through another counting system if approved by the SA.
18. Maintain necessary facilities for storing, preparing, and serving foods which meet the proper sanitation and health standards in conformance with all applicable state and local laws and regulations. Schools shall obtain a minimum of two food safety inspections conducted by a State or local governmental agency responsible for food safety inspections. They shall post in a publicly visible location a report of the most recent inspection conducted, and provide a copy of the inspection report to a member of the public upon request (7 CFR 210.13(b)).
19. At its option, serve milk to split-session kindergarten students who do not have access to lunch or breakfast, in conformance to the requirements in 7 CFR Part 215.
20. Enter into an agreement to receive donated foods as required by 7 CFR Part 250 (7 CFR 210.9 (13)).
21. Accept and use, in quantities as large as may be efficiently utilized in the program, such foods as may be offered by USDA.
22. Comply with Title VI of the Civil Rights Act of 1964 (42 U.S.C. § 2000d et seq.), Title IX of the Education Amendments of 1972 (20 U.S.C. § 1681 et seq.), Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. § 794), the Age Discrimination Act of 1975 (42 U.S.C. § 6101 et seq.); all provisions required by the implementing regulations of the Department of Agriculture; Department of Justice Enforcement Guidelines, 28 CFR Part SO.3 and 42; and FNS directives and guidelines, to the effect that, no person shall, on the grounds of race, color, national origin, sex, age, or disability, be excluded from participation in, be denied benefits of, or otherwise be subject to discrimination under any program or activity for which the program applicant receives Federal financial assistance from FNS; and hereby gives assurance that it will immediately take measures necessary to effectuate this agreement.
23. Make no discrimination against any child because of his or her eligibility for free or reduced price meals in accordance with the approved Free and Reduced Price Policy Statement.
24. Complies with the Drug-Free Workplace (DFW) as required by 7 CFR Part 3021. The SFA must make a good-faith effort, on a continuing basis, to maintain a DFW (including taking specific actions described at 7 CFR Part sec. 3021.200 through 3021.230), and identify all workplace locations where work under 7 CFR Part 210, 215, and 220 will be performed (7 CFR Part sec. 3021.200).
25. Complies with the requirements on Government-Wide Suspension and Debarment in 7 CFR Part 3017.
26. Complies with New Restrictions on Lobbying in 7 CFR Part 3018. Certification regarding lobbying as required by Section 1352,

Title 31, U.S. Code, sponsoring agencies receiving \$100,000 or more must certify that:

- i. No Federal appropriated funds have been paid or will be paid, by or on behalf of the sponsor, to any person for influencing or attempting to influence an officer or employee by any agency, a Member of Congress, an officer or employee of Congress, or an employee of Member of Congress in connection with the awarding of a Federal contract, the making of a Federal grant, the making of a Federal loan, the entering into of a cooperative agreement, and the extension, continuation, renewal, amendment, or modification of a Federal contract, grant, loan, or cooperative agreement.
  - ii. If any funds other than the Federally-appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of Congress, or an employee of a cooperative agreement, the sponsor shall complete and submit Standard Form-LLL, 'Disclosure Form to Report Lobbying,' in accordance with its instructions.
  - iii. The sponsor shall require that the language of this certification be included in the award documents for all covered subawards exceeding \$100,000 in Federal funds at all appropriate tiers and that all subrecipients shall certify and disclose accordingly.
27. Promote and document activities to involve children and parents in the program.
  28. Comply with the requirements of USDA's Uniform Federal Assistance Regulations 7 CFR Part 3016 or 3019, as appropriate concerning the procurement of supplies, food, equipment and other services with Program funds.
  29. Complies with Federal audit requirements as set forth in OMB Circular A-133 (public and private entities) which were issued pursuant to the Single Audit Act of 1984 (Public Law 98-502).
  30. That it will/will not recover indirect costs from program funds in accordance with USDA approved base (reference D9 accounting form) and the annual rate calculated by the Department of Education.
  31. No later than March 1, 1997, and no later than December 31 of each year thereafter, provide the State agency with a list of all elementary schools under its jurisdiction in which 50 percent or more of enrolled children have been determined eligible for free or reduced price meals as of the last operating day the preceding October. The State agency may designate a month other than October for the collection of this information, in which case the list must be provided to the State agency within 60 calendar days following the end of the month designated by the State agency. In addition, each school food authority shall provide, when available for the schools under its jurisdiction, and upon the request of a sponsoring organization of day care homes of the Child and Adult Care Food Program, information on the boundaries of the attendance areas for the elementary schools identified as having 50 percent or more of enrolled children certified eligible for free or reduced price meals.

**If the sponsoring agency is sponsoring the Child and Adult Care Food Program it further agrees to the following additional requirements:**

1. Attend State Agency training each fiscal year.
2. Ensure that meals served in all center/homes shall meet the minimum requirements specified by the federal regulations.
3. Obtain family-size and income information on enrolled participants and report such information to the State Agency for reimbursement purposes.
4. Determine that all meal procurements with food service management companies are in conformance with the bid and contractual requirements of 7 CFR Parts 226.21 and 226.22.
5. Secure an audit in accordance with the appropriate OMB Circular if they are a public or private nonprofit sponsor and receive \$500,000 or more in Federal funds.
6. The terms of this Agreement and the detailed information contained on the Application/Management Plan, and Schedule A or B, which shall be considered a part of this Agreement, shall not be modified or changed in any other way than by consent in writing of both parties hereto.
7. It is understood and agreed by and between the State Agency and the Sponsoring Agency whether public, private, or for-profit that the regulations of the United States Department of Agriculture at, 7 CFR Part 226, and Kentucky Department of Education rules as related to the respective programs, are made a part of this Agreement and that the State Agency and the Sponsoring Agency are to abide by all of the conditions and terms set forth in the regulations.

**If the Sponsoring Agency is sponsoring the Summer Food Service Program it further agrees to the following additional requirements:**

1. Provide adequate supervisory and operational personnel for overall monitoring and management of each food service site including adequate personnel to visit all food service sites at least once in the first week of operation and to promptly take such actions as are necessary to correct deficiencies found at the time of the initial visit, and to complete a monitor review at each site at least once during the first four weeks of operation, and thereafter, to maintain a reasonable level of site monitoring and maintain documentation of each visits using a monitoring form provided by the State Agency.
2. Maintain children on site while meals are being consumed.

3. Serve meals which meet the meal requirements specified during a period designated as the meal service period.
4. Serve meals without cost to all children at non-residential sites (except that camps may charge for meals served to children who are not eligible for free or reduced price meals).
5. Claim reimbursement only for the type or types of meals specified in the Agreement and served without charge to eligible children at approved sites during the approved meal service period.
6. Submit claims for reimbursement in accordance with procedures established by the State Agency, and those stated in 7 CFR Part 225.9.
7. Maintain on-file documentation of site visits and monitor reviews in accordance with 7 CFR Part 225.15(d)(2)(3).
8. Schedule A is completed, accurately documented, and attached.
9. Upon approval by the State Agency, sites may not be added after June 15 and may be deleted as the need arises.
10. Any sponsor that is required by statute, ordinance, resolution, or order to follow the procurement practices required by KRS 424.260 shall use such procurement practices for any program under the Summer Food Service Program for Children unless such agency has adopted the provisions of KRS 45A.345 through 45A.460, in which case, the latter shall apply. Any sponsor that is not a public agency and is not subject to any state local procurement laws or regulations shall follow the procurement requirements of KRS 424.260.

**If the SFA is sponsoring the Special Milk Program, including milk offered to children attending split-session kindergarten who do not have access to a school's meal program, it further agrees to the following additional requirements:**

The SFA and participating schools under its jurisdiction shall comply with all provisions of 7 CFR Part 215 and 245.

Specifically, the SFA shall note the following in 7 CFR Part 215.7:

- d. Each school food authority or child care institution approved to participate in the program shall enter into a written agreement with the State agency or FNSRO, as applicable, that may be amended as necessary. Nothing in the preceding sentence shall be construed to limit the ability of the State agency to suspend or terminate the agreement in accordance with Sec. 215.15. If a single State agency administers any combination of the Child Nutrition Programs, that State agency shall provide each SFA with a single agreement with respect to the operation of those programs. Such agreement shall provide that the School Food Authority or child-care institution shall, with respect to participating schools and child-care institutions under its jurisdiction:
  1. Operate a nonprofit milk service. However, school food authorities may use facilities, equipment, and personnel supported with funds provided to a school food authority under this part to support a nonprofit nutrition program for the elderly, including a program funded under the Older Americans Act of 1965 (42 U.S.C. 3001 et seq.).
  2. If electing to provide free milk (i) serve milk free to all eligible children, at times that milk is made available to nonneedy children under the Program; and (ii) make no discrimination against any needy child because of his inability to pay for the milk.
  3. Comply with the requirements of the Department's regulations respecting nondiscrimination (7 CFR part 15);'
  4. Claim reimbursement only for milk as defined in this part and in accordance with the provisions of Sec. 215.8 and Sec. 215.10;
  5. Submit Claims for Reimbursement in accordance with Sec. 215.10 of this part and procedures established by the State agency or FNSRO where applicable;
  6. Maintain a financial management system as prescribed by the State agency, or FNSRO where applicable;
  7. Upon request, make all records pertaining to its milk program available to the State agency and to FNS or OA for audit and administrative review, at any reasonable time and place.
 

Such records shall be retained for a period of three years after the end of the fiscal year to which they pertain, except that, if audit findings have not been resolved, the records shall be retained beyond the three-year period as long as required for the resolution of the issues raised by the audit;
  8. Retain the individual applications for free milk submitted by families for a period of three years after the end of the fiscal year to which they pertain, except that, if audit findings have not been resolved, the records shall be retained beyond the three-year period as long as required for the resolution of the issues raised by the audit.
- e. State requirements. Nothing contained in this part shall prevent a State agency from imposing additional requirements for participation in the Program which are not inconsistent with the provision of this part.
  1. That the School Food Authority will conduct a nonprofit food service or, in the event no other food service is maintained, conduct a non-profit milk service.
  2. That a nonprofit school food service be exempt from income tax by provision of the Internal Revenue Service Code, as amended.
  3. That reimbursement will only be claimed for milk. Milk is defined as 'pasteurized fluid types of unflavored or flavored whole

milk, low fat, skim milk, or cultured buttermilk which meet State and local standards for such milk.'

4. That in the storage and service of milk, proper sanitation and health standards will conform to all applicable State and local laws and regulations.
5. That if electing to provide free milk, the Sponsoring Agency will (1) serve milk to all eligible children in accordance with USDA's free milk policy statement at the time that milk is made available to non-needy children under the Program; and (2) make no discrimination against any needy child because of his inability to pay for the milk.
6. That individual applications for free milk submitted by families will be retained for a period of three years after the end of the fiscal year to which they pertain, except that, if audit findings have not been resolved, the records shall be retained beyond the three year period as long as required for the resolution of the issues raised by the audit.

**If the SFA is sponsoring the After School Snack Program it further agrees to the following additional requirements:**

1. Attend SA training each fiscal year.
2. Claim reimbursement only those meal supplements (snacks) served during afterschool care programs that meet the meal pattern for supplements as set forth in 7 CFR Part 210.10(n).
3. Serve and claim snacks solely as part of an afterschool care program, or programs, the SFA operates, each such program providing regularly-scheduled education or enrichment activities in an organized, structured, and supervised environment.
4. Meet any State or local licensing, health and safety requirements for operating an afterschool care program.
5. Claim for reimbursement only those afterschool snacks served on school days. Any snacks served before or during the child's school day, or on weekends, holidays, or vacation periods, may not be claimed for reimbursement. Afterschool snacks may be claimed as part of afterschool care programs on days when summer school is in session if this summer school is an integral part of the curriculum or an extension of the local education program. For afterschool care programs in Residential Child Care Institutions (RCCIs), only those children who are enrolled and attending school may have their snacks served on school days claimed for reimbursement.
6. Keep a roster list, sign-in sheet, or other means to determine that children are present on a given day.
7. Claim snacks in the correct reimbursement category. All snacks will be served free and claimed in the free category for any site that is located in an area served by a school in which at least 50 percent of the enrolled students are certified eligible for free or reduced price meals. All sites not eligible to claim all snacks free on this basis must claim each snack according to the eligibility category—free, reduced price, or paid—of the child to whom the snack is served.
8. Count and record the number of snacks served each day, at the time they are served, by correct claiming category.
9. Price the meal supplement as a unit.
10. If charging for snacks, serve snacks free or at a reduced price to all children who are determined by the SFA to be eligible for free or reduced price meals under 7 CFR Part 245.
11. If charging for snacks, the charge for a reduced price meal supplement shall not exceed 15 cents.
12. Claim reimbursement at the assigned rates only for meal supplements served in accordance with the Agreement.
13. Claim reimbursement for no more than one meal supplement per child per day. Children from birth to age 18 years or a student of any age who is disabled, are eligible. If a student's nineteenth birthday occurs during the school year, snacks may be served and reimbursement claimed for that student for the remainder of the school year.
14. Maintain the following records, and follow the retention requirements per 7 CFR Part 210.23(c)—If all meals are claimed free based on the site's eligibility (see item 8, above), maintain documentation establishing each site's eligibility; For all other sites, documentation of free and reduced price eligibility for all children for whom free and reduced price snacks are claimed; Meal counts, by type, for each site for each serving day; Documentation of individual children's attendance on a daily basis; and, Menus and production records to document compliance with snack pattern requirements.
15. Review each afterschool care program two times per year; the first review shall be made during the first four weeks that the school is in operation each school year, except that an afterschool care program operating year round shall be reviewed during the first four weeks of its initial year of operation, once more during its first year of operation, and twice each school year thereafter.
16. Determine that all meal procurements with food service management companies are in conformance with the bid and contractual requirements of 7 CFR Part 210.16 and 210.21.
17. The terms of this Agreement and the detailed information contained on the Application/Management Plan, and Schedule A or B, which shall be considered a part of this Agreement, shall not be modified or changed in any other way than by consent in writing of both parties hereto.
18. It is understood and agreed by and between the SA and the SFA whether public, private, or for-profit that the regulations of the



United States Department of Agriculture at 7 CFR Part 210 , and Kentucky Department of Education rules as related to the respective programs, are made a part of this Agreement and that the SA and the SFA are to abide by all of the conditions and terms set forth in the regulations.

19. Comply with all requirements of 7 CFR Part 210.10, except that, claims for reimbursement need not be based on — "point of service meal" supplement counts (as required by 7 CFR Part 210.9(b)(9)).

**If the SFA is sponsoring School Breakfast Program it further agrees to the following additional requirements:**

The SFA and participating schools under its jurisdiction shall comply with all provisions of 7 CFR Part 220 and 245.

Specifically, the SFA shall note the following in 7 CFR Part 215.7:

- e. Each school food authority approved to participate in the program shall enter into a written agreement with the State agency or the Department through the FNSRO, as applicable, that may be amended as necessary. Nothing in the preceding sentence shall be construed to limit the ability of the State agency or the FNSRO to suspend or terminate the agreement in accordance with Sec. 220.18. If a single State agency administers any combination of the Child Nutrition Programs, that State agency shall provide each SFA with a single agreement with respect to the operation of those programs. Such agreements shall provide that the School Food Authority shall, with respect to participating schools under its jurisdiction:
  1. (i) Maintain a nonprofit school food service; (ii) in accordance with the financial management system established under Sec. 220.13(i) of this part, use all revenues received by such food service only for the operation or improvement of that food service. Except that, facilities, equipment, and personnel support with funds provided to a school food authority under this part may be used to support a nonprofit nutrition program for the elderly, including a program funded under the Older Americans Act of 1965 (42 U.S.C. 3001 et seq.); (iii) revenues received by the nonprofit school food service shall not be used to purchase land or buildings or to construct buildings; (iv) limit its net cash resources to an amount that does not exceed three months average expenditure for its nonprofit school food service or such other amount as may be approved by the State agency; and (v) observe the limitations on any competitive food service as set forth in Sec. 220.12 of this part;
  2. Serve breakfasts which meet the minimum requirements prescribed in Sec. 220.8, during a period designated as the breakfast period by the school;
  3. Price the breakfast as a unit;
  4. Supply breakfast without cost or at reduced price to all children who are determined by the School Food Authority to be unable to pay the full price thereof in accordance with the free and reduced price policy statements approved under part 245 of this chapter;
  5. Make no discrimination against any child because of his inability to pay the full price of the breakfasts;
  6. Claim reimbursement at the assigned rates only for breakfasts served in accordance with the agreement;
  7. Submit Claims for Reimbursement in accordance with Sec. 220.11 of this part and procedures established by the State agency, or FNSRO where applicable;
  8. Maintain, in the storage, preparation and service of food, proper sanitation and health standards in conformance with all applicable State and local laws and regulations, and comply with the food safety inspection requirement in paragraph (a)(2) of this section;
  9. Purchase, in as large quantities as may be efficiently utilized in its nonprofit school food service, foods designated as plentiful by the State Agency, or CFPDO, where applicable;
  10. Accept and use, in as large quantities as may be efficiently utilized in its nonprofit school food service, such foods as may be offered as a donation by the Department;
  11. Maintain necessary facilities for storing, preparing, and serving food;
  12. Maintain a financial management system as prescribed by the State agency, or FNSRO where applicable;
  13. Upon request, make all accounts and records pertaining to its nonprofit school food service available to the State agency, to FNS and to OA for audit or review at a reasonable time and place. Such records shall be retained for a period of three years after the end of the fiscal year to which they pertain, except that if audit findings have not been resolved, the records shall be retained beyond the three-year period as long as required for the resolution of the issues raised by the audit;
  14. Retain the individual application for free and reduced price breakfasts submitted by families for a period of three years after the end of the fiscal year to which they pertain; and
  15. Comply with the requirements of the Department's regulations respecting nondiscrimination (7 CFR part 15).
- f. Nothing contained in this part shall prevent the State Agency from imposing additional requirements for participation in the program which are not inconsistent with the provisions of this part.

**THE STATE AGENCY AND THE SPONSORING AGENCY MUTUALLY AGREE THAT:**

1. This agreement may be amended or terminated upon ten (10) days' written notice by either party hereto; further, the State Agency may terminate this agreement immediately upon receipt of evidence that the terms and conditions of this agreement are not being fully complied with by the Sponsoring Agency or by any participating school(s) or unit(s); 'Except that any termination of this agreement for noncompliance with Title VI of the Civil Rights Act of 1964 shall be in accordance with applicable laws and regulations.'
2. This agreement, to be valid, must be executed by both the legal representatives of the Sponsoring Agency and the legal representative of the State Agency.

This is to certify that I have read this agreement, and I will, as superintendent or other legal representative of the Sponsoring Agency, cause the program(s) to be conducted in full compliance with all applicable terms of this Agreement. This Agreement shall apply to (1) all school food authorities for which an approved acceptance form is on file; (2) all schools for which a current approved application is on file; (3) all child and adult care sites which a current approved application is on file; and (4) all summer food service program sites for which a current approved application is on file with the State Agency. I understand that this agreement is being entered into in conjunction with the receipt of federal funds and that deliberate misrepresentation may subject me to prosecution under applicable state and federal criminal statutes.

School Food Authority ☒ will ☐ will not recover indirect cost.

#### Sponsor

Signing authority is responsible for notifying the Board of Education and Administrators of the legal ramifications of all approval documents.

Signature	Title	Date
Sabrina Jewell	Director	09/13/2011

#### Kentucky Department of Education Signature

Denise Hagan/mld

#### Title

NHS Director

#### Approval Date

10/11/2010

#### Fiscal Year

2011

This agreement shall be effective with respect to meals served commencing:

10/01/2010 To: 09/30/2011

Print

Submit

Cancel

Agreement

School Information

Application

Designated Officials

NSLP/SBP/SMP Menu

NH2510A 09/13/2011

In accordance with Federal law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age or disability. To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, Room 326-W, Whitten Building, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410 or call (202) 720-5964 (voice and TDD). USDA is an equal opportunity provider and employer pursuant to Title VI of the Civil Rights Act of 1964, 42 USC 2000d and 7 CFR part 15.

Forms and Guidance | Help

## NSLP/SBP/SMP School Summary

SCN Help Desk 502-564-5632

Sponsor Name: HENDERSON CO. BOE

Sponsor Number: 051-251-999-0A

FEID:

616001295-EXX

Activate School

HENDERSON CO. BOE

# Schools 13

Lunch	Offer vs. Serve	Breakfast	Offer vs. Serve	Severe Need
13	13	13	13	13

After- school Snacks	Income Eligible	Area Eligible
4	0	4

051-251-999-0A

Paid Price	Bid Price	Split-session Kindergarten	Full- price and Free Milk	Full- price Milk Only	# of Schools on Special Milk
0.0000	0.0000	0	0	0	0

	Paid Student Price Low	Paid Student Price High	Paid Adult Price Low	Paid Adult Price High	Reduced- price Low	Reduced- price High
Lunch	1.55	1.55	3.25	3.25	0.40	0.40
Breakfast	0.90	0.90	2.25	2.25	0.30	0.30
Snack	0	0	0	0	0	0

## School Number

School Name: HENDERSON COUNTY ACADEMY

School Address: 1715 SECOND ST

City: HENDERSON State: KY Zip Code: 42420

Lunch	Offer vs. Serve	Collection Method	Max Paid Student Price	Max Paid Adult Price	Max Reduced Price
1	1	01	1.55	3.25	0.40
Breakfast	Offer vs. Serve	Collection Method	Max Paid Student Price	Max Paid Adult	Max Reduced

Revise 051-251-A68-0A

Approved Date:  
09/16/2010

Original Date:  
09/16/2010

	1	1	01	0.90	Price 2.25	Price 0.30
Severe Need	After-school Snacks	Collection Method	Max Paid Student Price	Max Paid Adult Price	Max Reduced Price	
100%	0	00	0.00	0.00	0.00	
Paid Price	Bid Price	Type of Milk:	None			
0.0000	0.0000					

**School Number**

**School Name:** BEND GATE ELEMENTARY SCHOOL  
**School Address:** 920 BEND GATE RD  
**City:** HENDERSON **State:** KY **Zip Code:** 42406

Revise 051-251-010-0A

Approved Date:  
09/16/2010  
Original Date:  
09/16/2010

Lunch	Offer vs. Serve	Collection Method	Max Paid Student Price	Max Paid Adult Price	Max Reduced Price
1	1	03	1.55	3.25	0.40
Breakfast	Offer vs. Serve	Collection Method	Max Paid Student Price	Max Paid Adult Price	Max Reduced Price
1	1	03	0.90	2.25	0.30
Severe Need	After-school Snacks	Collection Method	Max Paid Student Price	Max Paid Adult Price	Max Reduced Price
64%	0	00	0.00	0.00	0.00
Paid Price	Bid Price	Type of Milk:	None		
0.0000	0.0000				

**School Number**

**School Name:** CAIRO ELEMENTARY SCHOOL  
**School Address:** 10694 HWY 41-A  
**City:** HENDERSON **State:** KY **Zip Code:** 42420

Revise 051-251-020-0A

Approved Date:  
09/16/2010  
Original Date:  
09/16/2010

Lunch	Offer vs. Serve	Collection Method	Max Paid Student Price	Max Paid Adult Price	Max Reduced Price
1	1	03	1.55	3.25	0.40
Breakfast	Offer vs. Serve	Collection Method	Max Paid Student Price	Max Paid Adult Price	Max Reduced Price
1	1	03	0.90	2.25	0.30
Severe Need	After-school Snacks	Collection Method	Max Paid Student Price	Max Paid Adult Price	Max Reduced Price
48%	0	00	0.00	0.00	0.00

Paid Price	Bid Price	Type of Milk:	None
0.0000	0.0000		

**School Number**

**School Name:** AB CHANDLER ELEMENTARY SCHOOL  
**School Address:** 11215 US 60W  
**City:** CORYDON **State:** KY **Zip Code:** 42406

Revise 051-251-030-0A

Approved Date:

09/16/2010

Original Date:

09/16/2010



Lunch	Offer vs. Serve	Collection Method	Max Paid Student Price	Max Paid Adult Price	Max Reduced Price
1	1	03	1.55	3.25	0.40
Breakfast	Offer vs. Serve	Collection Method	Max Paid Student Price	Max Paid Adult Price	Max Reduced Price
1	1	03	0.90	2.25	0.30
Severe Need	After-school Snacks	Collection Method	Max Paid Student Price	Max Paid Adult Price	Max Reduced Price
65%	0	00	0.00	0.00	0.00
Paid Price	Bid Price	Type of Milk:	None		
0.0000	0.0000				

**School Number**

**School Name:** EAST HEIGHTS ELEMENTARY SCHOOL  
**School Address:** 1776 ADAMS LN  
**City:** HENDERSON **State:** KY **Zip Code:** 42420

Revise 051-251-033-0A

Approved Date:

09/16/2010

Original Date:

09/16/2010



Lunch	Offer vs. Serve	Collection Method	Max Paid Student Price	Max Paid Adult Price	Max Reduced Price
1	1	03	1.55	3.25	0.40
Breakfast	Offer vs. Serve	Collection Method	Max Paid Student Price	Max Paid Adult Price	Max Reduced Price
1	1	03	0.90	2.25	0.30
Severe Need	After-school Snacks	Collection Method	Max Paid Student Price	Max Paid Adult Price	Max Reduced Price
58%	0	00	0.00	0.00	0.00
Paid Price	Bid Price	Type of Milk:	None		
0.0000	0.0000				

**School Number**

**School Name:** HENDERSON COUNTY HIGH SCHOOL

**School Address:** 2424 ZION RD  
**City:** HENDERSON **State:** KY **Zip Code:** 42420

Revise 051-251-060-0A

Approved Date:  
09/16/2010  
Original Date:  
09/16/2010  
☐

Lunch	Offer vs. Serve	Collection Method	Max Paid Student Price	Max Paid Adult Price	Max Reduced Price
1	1	03	1.55	3.25	0.40
Breakfast	Offer vs. Serve	Collection Method	Max Paid Student Price	Max Paid Adult Price	Max Reduced Price
1	1	03	0.90	2.25	0.30
Severe Need	After-school Snacks	Collection Method	Max Paid Student Price	Max Paid Adult Price	Max Reduced Price
58%	1	01	0.00	0.00	0.00
Paid Price	Bid Price	Type of Milk:	None		
0.0000	0.0000				

#### School Number

**School Name:** HENDERSON COUNTY NORTH MIDDLE  
**School Address:** 1707 SECOND ST  
**City:** HENDERSON **State:** KY **Zip Code:** 42420

Revise 051-251-065-0A

Approved Date:  
09/16/2010  
Original Date:  
09/16/2010  
☐

Lunch	Offer vs. Serve	Collection Method	Max Paid Student Price	Max Paid Adult Price	Max Reduced Price
1	1	03	1.55	3.25	0.40
Breakfast	Offer vs. Serve	Collection Method	Max Paid Student Price	Max Paid Adult Price	Max Reduced Price
1	1	03	0.90	2.25	0.30
Severe Need	After-school Snacks	Collection Method	Max Paid Student Price	Max Paid Adult Price	Max Reduced Price
51%	1	01	0.00	0.00	0.00
Paid Price	Bid Price	Type of Milk:	None		
0.0000	0.0000				

#### School Number

**School Name:** NIAGARA ELEMENTARY SCHOOL  
**School Address:** 13043 HWY 136 E  
**City:** HENDERSON **State:** KY **Zip Code:** 42420

Revise 051-251-070-0A

Lunch	Offer vs. Serve	Collection Method	Max Paid Student Price	Max Paid Adult Price	Max Reduced Price
1	1	03	1.55	3.25	0.40

Approved Date:  
09/16/2010  
Original Date:  
09/16/2010  
☐

Breakfast	Offer vs. Serve	Collection Method	Max Paid Student Price	Max Paid Adult Price	Max Reduced Price
1	1	03	0.90	2.25	0.30
Severe Need	After- school Snacks	Collection Method	Max Paid Student Price	Max Paid Adult Price	Max Reduced Price
45%	0	00	0.00	0.00	0.00
Paid Price	Bid Price	Type of Milk:	None		
0.0000	0.0000				

**School Number**

**School Name:** SOUTH HEIGHTS ELEMENTARY SCH  
**School Address:** 1199 MADISON ST  
**City:** HENDERSON **State:** KY **Zip Code:** 42420

Revise 051-251-091-0A

Approved Date:  
09/16/2010  
Original Date:  
09/16/2010  
☐

Lunch	Offer vs. Serve	Collection Method	Max Paid Student Price	Max Paid Adult Price	Max Reduced Price
1	1	03	1.55	3.25	0.40
Breakfast	Offer vs. Serve	Collection Method	Max Paid Student Price	Max Paid Adult Price	Max Reduced Price
1	1	03	0.90	2.25	0.30
Severe Need	After- school Snacks	Collection Method	Max Paid Student Price	Max Paid Adult Price	Max Reduced Price
87%	1	01	0.00	0.00	0.00
Paid Price	Bid Price	Type of Milk:	None		
0.0000	0.0000				

**School Number**

**School Name:** SPOTTSVILLE ELEMENTARY SCHOOL  
**School Address:** 9190 US 60E  
**City:** SPOTTSVILLE **State:** KY **Zip Code:** 42458

Revise 051-251-110-0A

Approved Date:  
10/12/2010  
Original Date:  
10/12/2010  
☐

Lunch	Offer vs. Serve	Collection Method	Max Paid Student Price	Max Paid Adult Price	Max Reduced Price
1	1	03	1.55	3.25	0.40
Breakfast	Offer vs. Serve	Collection Method	Max Paid Student Price	Max Paid Adult Price	Max Reduced Price
1	1	03	0.90	2.25	0.30
Severe Need	After- school Snacks	Collection Method	Max Paid Student Price	Max Paid Adult Price	Max Reduced Price

50%	0	00	0.00	0.00	0.00
Paid Price	Bid Price	Type of Milk:	None		
0.0000	0.0000				

**School Number**

**School Name:** HENDERSON COUNTY SOUTH MIDDLE  
**School Address:** 800 S ALVES ST  
**City:** HENDERSON **State:** KY **Zip Code:** 42420

Revise 051-251-150-0A

Approved Date:  
09/16/2010Original Date:  
09/16/2010

Lunch	Offer vs. Serve	Collection Method	Max Paid Student Price	Max Paid Adult Price	Max Reduced Price
1	1	03	1.55	3.25	0.40
Breakfast	Offer vs. Serve	Collection Method	Max Paid Student Price	Max Paid Adult Price	Max Reduced Price
1	1	03	0.90	2.25	0.30
Severe Need	After-school Snacks	Collection Method	Max Paid Student Price	Max Paid Adult Price	Max Reduced Price
54%	1	01	0.00	0.00	0.00
Paid Price	Bid Price	Type of Milk:	None		
0.0000	0.0000				

**School Number**

**School Name:** JEFFERSON ELEMENTARY SCHOOL  
**School Address:** 315 JACKSON ST  
**City:** HENDERSON **State:** KY **Zip Code:** 42420

Revise 051-251-160-0A

Approved Date:  
09/16/2010Original Date:  
09/16/2010

Lunch	Offer vs. Serve	Collection Method	Max Paid Student Price	Max Paid Adult Price	Max Reduced Price
1	1	03	1.55	3.25	0.40
Breakfast	Offer vs. Serve	Collection Method	Max Paid Student Price	Max Paid Adult Price	Max Reduced Price
1	1	03	0.90	2.25	0.30
Severe Need	After-school Snacks	Collection Method	Max Paid Student Price	Max Paid Adult Price	Max Reduced Price
77%	0	00	0.00	0.00	0.00
Paid Price	Bid Price	Type of Milk:	None		
0.0000	0.0000				

**School Number**



**School Name:** CENTRAL LEARNING CENTER ALT  
**School Address:** 851 CENTER ST  
**City:** HENDERSON **State:** KY **Zip Code:** 42420

Revise 051-251-185-0A

Approved Date:  
09/16/2010  
Original Date:  
09/16/2010  
☐

Lunch	Offer vs. Serve	Collection Method	Max Paid Student Price	Max Paid Adult Price	Max Reduced Price
1	1	03	1.55	3.25	0.40
Breakfast	Offer vs. Serve	Collection Method	Max Paid Student Price	Max Paid Adult Price	Max Reduced Price
1	1	03	0.90	2.25	0.30
Severe Need	After- school Snacks	Collection Method	Max Paid Student Price	Max Paid Adult Price	Max Reduced Price
83%	0	00	0.00	0.00	0.00
Paid Price	Bid Price	Type of Milk:	None		
0.0000	0.0000				

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Designated Officials

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In accordance with Federal law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age or disability. To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, Room 326-W, Whitten Building, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410 or call (202) 720-5964 (voice and TDD). USDA is an equal opportunity provider and employer pursuant to Title VI of the Civil Rights Act of 1964, 42 USC 2000d and 7 CFR part 15.

Forms and Guidance | Help

## NSLP/SBP/SMP Application

SCN Help Desk 502-564-5632

Sponsor Name: HENDERSON CO. BOE

Sponsor Number: 051-251-999-0A  
EXX

FEID: 616001295-

1. Sponsor Information: If the information below is not correct, you must contact the State Agency to have your records updated.

Address: 1805 SECOND STREET

City: HENDERSON State: KY Zip Code: 42420-0000

Name of School Food Service Director/Administrator:

Sabrina Jewell

Phone Number of School Food Service Director/Administrator:

270-831-5015

Email of School Food Service Director/Administrator:

sabrina.jewell@henderson.kyschools.us

2. Check any month(s) in which you will NOT operate the approved programs at any school:

☐ October ☐ November ☐ December ☐ January ☐ February ☐ March☐ April ☐ May ☒ June ☒ July ☐ August ☐ September

3. Child Nutrition Program(s) that your agency sponsors are:

☒ Claiming free, reduced, and paid meals in accordance with family size and income scale. Agree to keep documentation for reimbursement.☐ Claiming Paid Reimbursement only. Agree to keep minimal amount of records for reimbursement.

4. Check programs operated and list maximum amounts:

☒ National School Lunch ProgramMaximum Reduced-price Lunch: 0.40  
\$☒ School Breakfast ProgramMaximum Reduced-price  
Breakfast: \$ 0.30☒ After-school Snack ProgramMaximum Reduced-price Snack:  
\$

5. Menu Planning Option:

Traditional Meal Pattern

6. Check here if School Food Authority is using 'any reasonable approach' or alternate menu planning.

☒ Yes ☐ No

7. Method of Meal Preparation:

☒ On-site Meal Preparation☒ Preparation at Central Location☐ Contract with food management company (Send copy of contract to NHS)☐ Other

8. Faith Based Code

Select the three-digit code from the list below that best describes your sponsoring organization:

EDU-Educational institution

9. RCCI's Only

☐ Check here if sponsor is a Residential Child Care Institution.

Describe how supper meals, snacks, staff meals and other non-reimbursable meals are counted and reported in Section I of the claim and not included in Section II:

Sponsor Initials

sj

For State Use Only

mld

Consultant

09/16/2010

Approved Date

09/16/2010

Original Date

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NH2510A 09/13/2011

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Forms and Guidance | Help

## NSLP/SBP/SMP Designated Officials

SCN Help Desk 502-564-5632

Sponsor Name: HENDERSON CO. BOE

Sponsor Number: 051-251-999-0A

FEID:

616001295-EXX

Approving  
Official:

Sabrina Jewell

Phone:

270-831-5015

Hearing  
Official:

Dr. Thomas Richey

Phone:

270-831-5000

Verification  
Official:

Sabrina Jewell

Phone:

270-831-5015

Sampling Method:

Alternate 1

Sponsor Initials

sj

For State Use Only

mld

Consultant

Approved Date

09/16/2010

Original Date

Print

Submit

Cancel

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NSLP/SBP/SMP Menu

NH2510A 09/13/2011

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